

ANNEX TO THE EDC BCAP GUARANTEE

TRANSACTION DETAIL FORM

By submitting this Annex A, the Institution listed below hereby:

- a) submits the Transaction below for guarantee coverage under the EDC BCAP Guarantee issued by EDC to the Institution; and
- b) agrees that the guarantee coverage for this Transaction shall be subject to the BCAP Approval issued to the Institution (including the special conditions listed in the BCAP Approval and the EDC Guarantee General Terms and Conditions incorporated to the BCAP Approval by reference).

Complete this form electronically. Note that * indicates a mandatory field.

FINANCIAL INSTITUTION DETAILS

Legal name of financial institution ("the Institution")*	
Address*	
City*	
Province*	
Postal code*	
Financial institution primary contact*	
E-mail Address*	
Telephone*	

TRANSACTION DETAILS

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Facility Type*		Cash flow term loan
(please tick the appropriate box)		Operating line
Facility name as per the loan de	ocumentation*	
Facility number as per the loan (if applicable)	documentation	
Legal name of primary borrowe	er*	
Borrower Risk Rating as of March 1, 2020*	Standard & Poor's Scale (note that the minimum	
(note that the probability of	acceptable risk rating is CCC-)	
default should be used <u>only</u> if the Institution does not map its internal risk rating to the	Probability of Default (note that the maximum acceptable probability of	
Standard & Poor's scale)	default is 15%)	
Borrower Industry Classification Code* (as per the Institution's systems)		
CRA Business Number* (this number was provided in the Confirmation of Successful Application email sent by EDC)		
Address of primary borrower* (Please indicate street, city, provin	ce, postal code)	
Effective Date of the BCAP Gua	rantee*	
Loan Amount* (note that the guaranteed amount the loan amount cannot exceed CA	is 80% of the loan amount, and that AD 6.25 million)	