



CNMI State Trade Expansion Program (STEP)

The CNMI State Trade Expansion Program (STEP) grant is a state-federal partnership, funded in part through a grant from the Small Business Administration (SBA). This two-year grant provides financial assistance to qualified CNMI small businesses for international marketing efforts to begin exporting or increase their market expansion. This in turn creates growth and job creation.

The goal for the 2020 STEP program is export to target markets in Korea, with possibility into Japan, Taiwan and the Micronesian Islands.

Such assistance includes website development, translation services, product packaging/labeling, business matchmaking and attendance to a foreign trade show.

To qualify for STEP, eligible businesses must meet the US SBA definition of a small business, have an active business license of at least 12 months, have an exportable product made in the CNMI or has been 50% value-added per US Commercial Service regulations, and be a US Citizen or Permanent Resident Alien.

The CNMI STEP team members include:

Edward M. Deleon Guerrero – STEP Project Director Kioshi K. Cody – STEP Project Coordinator Jo Anna C. Ada – STEP Compliance Coordinator

For more information about the CNMI STEP program, contact the CNMI Department of Commerce at telephone number (670) 664-3065 ext. 108 or email your request to: *cnmi.step@commerce.gov.mp*.



CNMI STEP CLIENT APPLICATION



All financial, information and intellectual property will be kept confidential

COMPANY INFORMATION

Company Name		TIN:		NAICS:
Type (Limited		Year of		Number of
liability,etc.)		Inception		Employees
				in CNMI
Company				
Contact Person				
Address				
Phone		Email		
Business				
Description				
Annual Revenue				
Aimai Revenue				
Percentage of				Export
export sales				Destinations
	nal Distribution Chann			
 □ Direct sales to retailers or retail chains □ Direct sales to end users □ New to export □ Sales through specialized importers/wholesalers □ Sales through one or more distributors 				
	voman, minority, disal	oled individu	ual or vetera	an-owned
PRADUCT / SERV	VICE INFORMATION)N		
Is your product pro)1 \		
value added in CN				
STEP ACTIVITY				
In which STEP activity are you planning to participate?				
☐ Export Tra	nining		1 Market Er	ntry Support:
_	ddle of the Exporter			S. Commercial Service:
	aining			 Gold Key Matching
o Pro	ofit Mastery			 International Partner Search
	lividual Participation i			 Customized Market Research
	port Training: offered	by		 International Company Profile
	partners such as the		***	International Market Check
	A, U.S. Commercial			bel translation.
Sei Trade S	rvice, etc. Show		iat	UCI HANSIALIUII.

"The US Small Business Administration (SBA) would like to give eligible small business concerns the opportunity to expand your knowledge and resources of other export programs that are offered by the agency and other federal agencies. Please check the appropriate box if you would like your company's name and contact information to be shared with other relevant agencies to learn more about federal export programs. Your choice to participate or not will not change the status of your participation with STEP. SBA's aim is strictly to share information about other opportunities with you." This will be followed by "Yes" and "No." If the STEP client selects "Yes", the client's company name, contact person, email address or website address must be included on the Client Report. YES NO APPLICANT CERTIFICATION The applicant hereby certifies: A. That the CNMI Department of Commerce and the STEP Review Committee are hereby authorized to verify in any manner deemed appropriate any and all items in or related to this Application including investigation of judicial records, information available through state or federal departments or agencies including tax clearance records, credit bureau services, and business reporting services. B. Applicant is aware that the CNMI Department of Commerce must comply with certain State requirements which may impact proposed projects. Funded projects must comply with all State laws and regulations. C. To the best of Applicant's knowledge and belief, the information contained in this Application summary is true and correct and the governing body of the Applicant has duly authorized the document. Signature Printed Name

Title

Date

Attachments/Checklist

The following attachments must be included with this Application:
SBA Self-Representation as an 'Eligible Small Business Concern' Form
SBA Form 1623 'Certification Regarding Debarment' Form
CNMI STEP Grant Export Readiness Questionnaire Form—only required for foreign tradeshows/trade missions and market entry support activities
INSTRUCTIONS:
Please sign, date and return the application, along with the above attachments, to the address listed below:
Edward M. Deleon Guerrero
CNMI Department of Commerce
P.O. Box 5795 CHRB
Saipan, MP 96950

Please note that at the discretion of the STEP Review Committee, additional documentation may be required before the Application is deemed complete.

cnmi.step@commerce.gov.mp



"Funded in part through a grant with the U.S. Small Business Administration"



SELF-REPRESENTATION AS AN 'ELIGIBLE SMALL BUSINESS CONCERN

The undersigned seeks services from a State grant recipient under the Trade Facilitation and Trade Enforcement Act of 2015 (HR 644) which authorized the State Trade Expansion Program (STEP).

Section 503 of the Trade Facilitation and Trade Enforcement Act of 2015 defines the term 'eligible small business concern,' as a business concern that:

- 1. Is organized or incorporated in the United States;
- 2. Is operating in the United States,
- 3. Meets
 - a. The applicable industry-based small business size standard established under section 3 of the Small Business Act; or
 - b. The alternate size standard applicable to the program under section 7(a) of the Small Business Act and the loan programs under title V of the Small Business Investment Act of 1958 (15 U.S.C. 695 et seq.);

The U.S. Small Business Administration (SBA) size standards are found at 13 C.F.R. Part 121. Use the following sba.gov link for information on size standards for your business (https://www.sba.gov/category/navigation-structure/contracting/contracting-officials//small-business-size-standards)

- 4. Has been in business for not less than 1 year, as of the date on which assistance using a grant under this subsection commences; and
- 5. Has access to sufficient resources to bear the costs associated with trade, including the costs of packing, shipping, freight forwarding, and customs brokers.

The undersigned certifies that this is an export ready U.S. company seeking to export goods or services of U.S. origin or have at least 51% U.S. content.

Submitting false information in order to obtain services from a STEP grant recipient is a violation of Federal law. If you submit false information the Government may seek criminal, civil, and/or administrative remedies against you, pursuant to 18 U.S.C. §§ 1001, 1040; and 31 U.S.C. §§ 3729-3733. The Government may elect to exclude you from further participation in certain Federal programs and contracts if you submit false information in connection with receiving services from a STEP grant recipient.

I hereby certify that the business I represent is seeking services from a STEP grant recipient and is an eligible small business concern,* pursuant to the above definition.

SIGNATURE	DATE
TITLE	COMPANY NAME



Certification Regarding Debarment, Suspension, and Other Responsibility Matters Primary Covered Transactions

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 13 CFR Part 145. The regulations were published as Part VII of the May 26, 1988 *Federal Register* (pages 19160-19211). Copies of the regulations are available from local offices of the U.S. Small Business Administration.

(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS ON REVERSE)

(1)	The prospective primary participant	certifies to the best of its knowle	edge and belief that it and its principals:
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- (a) Are not presently debarred, suspended, proposed for disbarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective primary participant shall attach an explanation to this proposal.

Business Name		
Date	Ву	
		Name and Title of Authorized Representative
		Signature of Authorized Representative

INSTRUCTIONS FOR CERTIFICATION

- 1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.
- 2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
- 3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If is is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.
- 4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
- 5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is submitted for assistance in obtaining a copy of those regulations (13 CFR Part 145).
- 6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.
- 7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transactions," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
- 8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the ineligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.
- 9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- 10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.





CNMI STEP Program Export Readiness Questionnaire

BASIC INFORMATION		
Company Name		
Address		
Contact Person		
Phone		
E-Mail		
Company Website		
Industry		
ASSESSMENT QUI	ESTION (Circle o	ne)
Is your company registered to do business in the CNMI?	YES	NO
Has your company exported in the past?	YES	NO
Has your company attended any international trade shows or trade missions?	YES	NO
Does your company have marketing material available in foreign languages (including a website)?	YES	NO
Is your company more interested in exporting its product to:	ASIA	MICRONESIA
	EUROPE	SOUTH AMERICA



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DATA COLLECTION CNMI STEP PROGRAM



(For Eligible Small Business Concerns)

Company Name:		E-mail:	
Street Address/P.O. Box:			
Telephone#:			
Projected export sales w	ithin the next 12 to 18 months:		
	Required for Reporting Purp	oses:	
New to Export: ☐YES ☐NO	Market Expansion: TYES TNO With	a Disability: □YES □NO	
Veteran Status: ☐Veteran ☐ Non-Veteran	Townian Disabled Veteron	y Status: ☐Rese ve or National Guard	
		□Acti ve Duty	
Gender: Male Fer	male	1	
Race:			
☐Asian ☐Black-African American ☐White ☐Native American/Alaskan Native ☐Native Hawaiian/other Pacific Islander			
In consideration of the CNMI STEP PROGRAM furnishing management or technical assistance or training, I waive all claims against the CNMI STEP personnel, its resource partners and volunteer resources arising from this assistance. I agree to provide any financial information monthly/quarterly for STEP reporting purposes (via web-based, paper form, email or phone call) and certify that all the information provided in this document, as well as any accompanying documents, are true and complete.			
Signature:		Date:	
FOR OFFICIAL USE:			
Actual export sales resulting from completed activities:			

