



CNMI STEP CLIENT APPLICATION

All financial, information and intellectual property will be kept confidential.

COMPANY INFORMATION

Company Name		TIN :		NAICS:	
Type (Limited liability, etc.)		Year of Inception		Number of Employees in CNMI	
Company Contact Person					
Address					
Phone		Email		Fax	
Business Description					
Annual Revenue					
Percentage of export sales		Export Destinations			
Current International Distribution Channels					
<input type="checkbox"/> Direct sales to retailers or retail chains		<input type="checkbox"/> Sales through specialized importers/wholesalers			
<input type="checkbox"/> Direct sales to end users		<input type="checkbox"/> Sales through one or more distributors			
<input type="checkbox"/> New to export					
Company is (please check one):					
Women Owned Business <input type="checkbox"/>		Minority Owned Business <input type="checkbox"/>		Disabled Individual Owned Business <input type="checkbox"/>	
Service Disabled or Veteran-Owned Business <input type="checkbox"/>					

PRODUCT / SERVICE INFORMATION

Harmonized System Code	
Is your product produced or value added in CNMI?	

STEP ACTIVITY

In which STEP activity are you planning to participate?	
<input type="checkbox"/> Export Training <ul style="list-style-type: none"> ○ Riddle of the Exporter Training ○ Profit Mastery ○ Individual Participation in Export Training: offered by our partners such as the SBA, U.S. Commercial Service, etc. <input type="checkbox"/> Trade Show	<input type="checkbox"/> Market Entry Support: <ul style="list-style-type: none"> ○ U.S. Commercial Service: <ul style="list-style-type: none"> ▪ Gold Key Matching ▪ International Partner Search ▪ Customized Market Research ▪ International Company Profile ▪ International Market Check ○ Website, marketing material, and product label translation

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

6. 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 trade shows/trade missions and market entry support activities



“Funded in part through a grant from the U.S. Small Business Administration”

INSTRUCTIONS:

Please sign, date and return the application, along with the above attachments, to the address listed below:

Mark O. Rabauliman
CNMI Department of Commerce
P. O. Box 5795 CHRB
Saipan, MP 96950
cnmi.step@commerce.gov.mp

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