



SUPPLEMENTAL QUESTIONNAIRE

Please complete and submit with JEDA Bond Application
 to: SC JEDA Attn: Claudia Miller
 1201 Main Street Suite 1600 Columbia SC 29201
 803.737.0284 cmiller@scjeda.com

APPLICANT/BORROWER'S INFORMATION

BORROWER NAME:

CORPORATE ADDRESS:

PROJECT ADDRESS (IF DIFFERENT):

BORROWER REQUIRED TO UPDATE ISSUER WITH ANY CHANGES TO THIS INFORMATION FOLLOWING BOND ISSUANCE:

RESPONSIBLE CONTACT FOR BILLING: ADDRESS/EMAIL/PHONE#:

RESPONSIBLE CONTACT FOR POST ISSUANCE COMPLIANCE: ADDRESS/EMAIL/PHONE#:

COUNTY(IES) PROJECT IS LOCATED IN:

PROPOSED PROJECT TIMELINE

JEDA APPLICATION SUBMITTED:

JEDA INDUCEMENT:

CCED APPROVAL:

TEFRA HEARING:

FINAL JEDA APPROVAL:

ANTICIPATED CLOSING DATE:

PROPOSED FINANCING STRUCTURE- COMPLETE ALL APPLICABLE

- REFUNDING ONLY**
 WHICH SERIES BONDS ARE BEING REFUNDED?
PLEASE PROVIDE ISSUER WITH ANTICIPATED SAVINGS TO BORROWER AT TIME APPLICATION IS SUBMITTED OR ADVISE THAT REFUNDING IS TO CONSOLIDATE DEBT SERVICE ONLY
- REFUNDING & NEW MONEY**
 WHICH SERIES BONDS ARE BEING REFUNDED?
- PRIVATE PLACEMENT**

<input type="checkbox"/>	LENDER[S] NAME PROVIDE FULL ADDRESS, CONTACT INFO, EMAIL AND PHONE NUMBER
<input type="checkbox"/>	IF LENDER NOT YET IDENTIFIED-RFP TO BE ISSUED/PENDING/HAS BEEN ISSUED LENDER[S] UNDER CONSIDERATION
<input type="checkbox"/>	TERM SHEET/LETTER OF INTENT ISSUED? PLEASE PROVIDE LOI/TERM SHEET
<input type="checkbox"/>	TARGET INVESTORS/MINIMUM DENOMINATION
<input type="checkbox"/>	PUBLIC PLACEMENT ADDRESS, CONTACT INFO, EMAIL AND PHONE NUMBER
<input type="checkbox"/>	UNDERWRITER ADDRESS, CONTACT INFO, EMAIL AND PHONE NUMBER
<input type="checkbox"/>	PLACEMENT AGENT ADDRESS, CONTACT INFO, EMAIL AND PHONE NUMBER
<input type="checkbox"/>	FINANCIAL ADVISOR ADDRESS, CONTACT INFO, EMAIL AND PHONE NUMBER
<input type="checkbox"/>	SWAP ADVISOR ADDRESS, CONTACT INFO, EMAIL AND PHONE NUMBER
<input type="checkbox"/>	TRUSTEE ADDRESS, CONTACT INFO, EMAIL AND PHONE NUMBER