

CalCAP Collateral Support Program

Financial Institution Claim Application

Capital Programs & Climate Financing Authority (CPCFA)

California Capital Access Program (CalCAP)

CalCAP@treasurer.ca.gov

(916) 654-5610

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CalCAP Use Only	Date Received:
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Lender Information

Participating Lender:

Lender CalCAP ID#:

Lender Contact Name:

Lender Contact Phone Number:

Lender Contact Email:

Borrower Information

Borrower Name:

Borrower's Business Name:

CSP #:

CalCAP Collateral Support Program Financial Institution Claim Application

Loan Information

Lender Loan Number:

Date of Loan:

Original Principal/Loan Amount:

Original Collateral Support Amount:

Charge-Off Amount:

Date of Charge-Off:

Claim Information

Amount Recovered From Liquidation:

Date of Final Collateral Liquidation:

Outstanding Principal:

The lender certifies that the given information is true and correct.

Authorized Lender Signature:

Date:

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* If the loan has yet to experience an Annual Review since the submission of the default notification all information shall be based on the date of default.

Total Amount of Claim:

Total Collateral Support Available:

Interest Earned Since Last Review in CS Loan Loss Reserve Account to be returned to CPCFA:

Total amount to be paid on Claim from CS Loan Loss Reserve Account:

Total Unused Support to be Returned to CPCFA:

First Reviewer's Signature:

Date:

Second Reviewer's Signature:

Date:

Executive Director's Approval:

Date

When complete, please send to: CalCAP@treasurer.ca.gov