

The following is initial information which EB-5 New York State, LLC (“EB5NYS”) collects to determine a person’s eligibility to participate in the United States EB-5 Regional Center program.

**Applicant for United States EB-5 Regional Center Visa Program**

Name:	Family Name:				
	Given Name:				
Can you communicate in English:	Yes ___ No ___ If No, which language				
Gender (Male/Female):					
Date of Birth:	Year ___ Month ___ Day ___				
Place of Birth:					
Citizen of what country:					
Identification Number <i>Identification number, passport number or US Taxpayer ID, together with Country of Issue</i>	<table border="1"> <tr> <th>Identification Number</th> <th>Country</th> </tr> <tr> <td> </td> <td> </td> </tr> </table>	Identification Number	Country		
	Identification Number	Country			
	Type of ID: _____				
Address: Home					
Street:					
City:					
State / County / Province:					
Country:					
Postal Code:					
Phone and E-mail					
Home Phone:					
Work Phone:					
Cell / Mobile Phone:					
Facsimile:					
E-mail address:					
Other (specify):					
Marital Status					
Marital Status:	Single ___ Married ___				
If Single:	Divorced ___ Widowed ___ Never Married ___				

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**Employment Information**

Employment	
Employer:	
Position:	
Start Date:	
Salary:	
Total Compensation:	
Employer Address	
Street:	
City:	
State / County / Province:	
Country:	
Postal Code:	

**Spouse of Applicant**

Name:					
Gender (Male/Female):					
Date of Birth:	Year ____ Month ____ Day ____				
Place of Birth:					
Citizen of what country:					
Identification Number <i>Identification number, passport number or US            Taxpayer ID, together with Country of Issue</i>	<table border="1"> <tr> <td>Identification Number</td> <td>Country</td> </tr> <tr> <td></td> <td></td> </tr> </table>	Identification Number	Country		
	Identification Number	Country			
Type of ID: _____					

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**Children of Applicant (under 21 years of age)**  
*(complete for each child)*

Name:		
Gender (Male/Female):		
Date of Birth:	Year ____	Month ____ Day ____
Place of Birth:		
Citizen of what country:		
Identification Number <i>Identification number, passport number or US          Taxpayer ID, together with Country of Issue</i>	Identification Number	Country
Type of ID: _____		

**Accredited Investor**

<i>Check all that apply:</i>	Yes?
Did the Applicant have an individual income in excess of US \$200,000 in each of the two most recent calendar years and does the Applicant reasonably expect to reach the same income level in the current year?	
Did the Applicant have a joint income with his or her spouse in excess of US \$300,000 in each of the two most recent calendar years and does the Applicant reasonably expect to reach the same level of joint income with his or her spouse in the current year?	
Does the Applicant's individual net worth, or joint net worth with his or her spouse, exceed US \$1,000,000? For purposes of this form, "net worth" means total assets (including personal property and other assets, but excluding the value of the personal residence) in excess of total liabilities (including any home mortgage liability only if and to the extent that the mortgage liability exceeds the value of the primary residence).	

**Agent or Attorney**

*Have you used, or do you intend to use the services of an attorney or an immigration agent? If yes, please provide:*

Name:	
Firm:	
Telephone:	
Facsimile:	
E-mail:	

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Address:	
Street:	
City:	
State / County / Province:	
Country:	
Postal Code:	

**Health Conditions, Criminal Offenses and National Security**

*Your U.S. immigration application could be denied for reasons such as health conditions, criminal offenses and national security. This is not a comprehensive listing of the possible grounds of ineligibility. You should consult your attorney to determine your eligibility. Please answer the following questions for purposes of our initial assessment of eligibility:*

Part A

A.1.	Have you been arrested, charged, convicted, fined or imprisoned for violating any law (excluding traffic violations)?	Yes _____ No _____
A.2.	Have you been a member of, or in any way affiliated with, the Communist Party?	Yes _____ No _____
A.3.	Have you been a member of, or in any way affiliated with, a terrorist organization?	Yes _____ No _____
A.4.	Have you, by willful misrepresentation of a material fact, ever applied for or obtained a visa, an immigration benefit, or entry in to the United States?	Yes _____ No _____
A.5.	Have you been deported or removed from the United States?	Yes _____ No _____
A.6.	Have you been in the past, or are you presently, in the United States without lawful immigration status or worked without employment authorization?	Yes _____ No _____
A.7.	Health grounds: Do you have a communicable disease of public health significance; or a physical or mental disorder that is a threat to the safety of others; or are you a drug abuser?	Yes _____ No _____
A.8.	Have you received public assistance in the United States, or are you likely to receive public assistance in the future?	Yes _____ No _____

If you answered “yes” to any of the questions above, you may be ineligible to immigrate to the United States. You should consult with an attorney expert in U.S. immigration law.

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Part B

B.1.	Are you able to provide documentation that traces your investment from your account to the account of the U.S. investment enterprise?	Yes _____ No _____
B.2.	Are you able to provide documentation that explains how you accumulated the funds used to make the investment?	Yes _____ No _____
B.3.	Are your investment funds from a lawful source?	Yes _____ No _____
B.4.	Do you have the capacity to participate in the U.S. investment enterprise as a limited partner?	Yes _____ No _____

If you answered “no” to any of the questions in Part B above, you will not be eligible for U.S. immigration based on investment.

The answers above provide EB5NYS with the initial information required to determine if the Applicant is suitable to receive the EB5NYS information about EB5NYS, potential investments and the EB-5 Regional Center Program. Completing the above does not obligate the potential Applicant or EB5NYS to enter into any transaction or do any thing further. Applicant acknowledges that EB5NYS can rely on Applicant’s answers to the above questions.

*The above is not, and under no circumstances is to be construed as an advertisement, an offer or a solicitation to sell or buy any securities.*

Signed this \_\_\_ day of \_\_\_\_\_, 20\_\_

By:

\_\_\_\_\_  
*Applicant*

\_\_\_\_\_  
*Please print Applicant’s name*

Signature witnessed by:

\_\_\_\_\_