



South Carolina
DEPARTMENT OF AGRICULTURE
OFFICE OF AGRIBUSINESS DEVELOPMENT

Hugh E. Weathers, Commissioner

GROWING AGRIBUSINESS FUND GRANT APPLICATION

SECTION 1: CONTACT INFORMATION

GRANT APPLICANT (COUNTY)

Contact Name (first/last) _____

Title _____

Organization Name _____

Mailing Address _____

City _____ State ____ ZIP _____

Office Phone _____

Mobile Phone _____

Email _____

Fax _____

State Vendor # _____

GRANT BENEFICIARY (COMPANY)

Contact Name (first/last) _____

Title _____

Organization Name _____

Mailing Address _____

City _____ State ____ ZIP _____

Office Phone _____

Mobile Phone _____

Email _____

Fax _____

The remittance address connected to the provided state vendor number matches the information listed above.

SECTION 2: PROJECT INFORMATION

PROJECT LOCATION

Project Name _____

Street Address _____ City _____ State ____ ZIP _____

County _____ SCDOR County Development Tier (Tiers 1-4) _____

Development Type (i.e. greenfield or existing bldg.) _____

PROJECT INVESTMENT & JOB CREATION

	TOTAL JOBS	AVERAGE WAGE	LAND & BUILDING	MACHINERY	TOTAL
YEAR 1					
YEAR 2					
YEAR 3					
YEAR 4					
YEAR 5					
TOTAL / AVERAGE					

PROJECT BUDGET & FUNDING

SOURCE	AMOUNT	% OF PROJECT COSTS
COMPANY		
LOCAL GOVERNMENT		
STATE GOVERNMENT		
FEDERAL GOVERNMENT		
OTHER		
TOTAL		

AGRICULTURAL PRODUCTS GROWN IN SOUTH CAROLINA

List the anticipated agricultural products grown in South Carolina which this project will use. Please include anticipated data on volume, acreage, and value that will be put into production and utilized as it relates to this project.

PRODUCT	TOTAL VOLUME	TOTAL ACRES IN NEW PRODUCTION	TOTAL VALUE (\$) PER ACRE	TOTAL VALUE (\$)

PROJECT OVERVIEW

Project Description & Overview

Company History

SECTION 3: ADDITIONAL INFORMATION

Please attach the following to the application:

- Exhibit A – Completed project profile sheet(s)
- Exhibit B – Company audited financial statements (i.e. balance sheet, income statement, statement of cash flows, etc.)
- Exhibit C – Estimate of the Project’s anticipated local property tax impact
- Exhibit D – Project construction schedule
- Exhibit E – Validation letter (form of letter included herein)
- Exhibit F – Other project details, i.e. engineering cost & schedule, site plan, conceptual drawings

SECTION 4: APPLICANT AND BENEFICIARY CERTIFICATIONS

The Applicant and Beneficiary (“Application Parties”) certify, warrant and represent that to the best of their knowledge, the information provided in this application is correct, based on current plans and projections, represents the best available data at time of application, and reflects current intentions of the Beneficiary.

The Application parties agree and acknowledge that submittal of this application in no way obligates the South Carolina Department of Agriculture to providing grant funds. Approval and subsequent distribution of grant funds is contingent upon formal approval by the Agribusiness Infrastructure Incentives Distribution Initiative Program Panel and execution of a legally binding performance agreement.

Applicant's Signature

Beneficiary's Signature

Applicant's Printed/Typed Name

Beneficiary's Printed/Typed Name

Date

Date

SECTION 5: RETURN APPLICATION

If you have any questions, or to return this application, please email:

Norris Thigpen

Agribusiness Development Director

nthigpen@scda.sc.gov

EXHIBIT A
COMPLETED PROJECT PROFILE SHEET
[SEE ATTACHED]

EXHIBIT B
COMPANY FINANCIAL STATEMENTS
[SEE ATTACHED]

EXHIBIT C

PROJECT'S ANTICIPATED LOCAL PROPERTY TAX IMPACT

[SEE ATTACHED]

EXHIBIT D

PROJECT'S ANTICIPATED CONSTRUCTION SCHEDULE

[SEE ATTACHED]

EXHIBIT E

VALIDATION LETTER

[SEE ATTACHED]

[Company Letterhead]

July 17, 20[]

Commissioner Hugh Weathers
South Carolina Department of Agriculture
1200 Senate St.
Columbia, SC 29201

Dear Commissioner Weathers:

[Legal name of Beneficiary] (the “Company”) understands that [name of Applicant] is applying to the South Carolina Department of Agriculture (the “Department”) for \$[amount of grant funds requested] in Growing Agribusiness Fund (“Agribusiness Funds”) to assist [name of applicant] in successfully expanding [project name] in [county name]. The Company also understands that in order for [name of applicant] to submit an acceptable application for these Agribusiness funds, [name of Applicant] must have certain information and commitments from the Company. I trust that the following information will meet the Department’s needs in this matter.

In total, and in connection with [name of project], the Company plans to invest [\$] and create [number of total jobs] in [county name] within five years. As a result of [project name], we believe [describe how project will impact and enhance the competitiveness of the County’s agribusiness industry and how the infrastructure project will maintain and increase the number of companies engaged in processing, packaging, manufacturing, distribution, and transportation of agricultural products, in turn providing more markets for agricultural producers] in [county name] over the long term.

[Project name] is a [describe project’s ownership structure] and, has, or will receive internal and external financing approvals to proceed with the project. Additionally, as indicated by the enclosed financial statements, the Company has the financial wherewithal to carry-out the project as planned.

We look forward to partnering with the SC Department of Agriculture on [project name] in [county name] and are excited to expand South Carolina’s Agribusiness industry. Please do not hesitate to contact me if I can be of any assistance with regard to the Department’s consideration of Agribusiness Fund support for [project name].

Sincerely,

[Name]

[Title]

EXHIBIT F

OTHER PROJECT DETAILS:

ENGINEERING COST & SCHEDULE

PROJECT SITE PLAN

CONCEPTUAL DRAWINGS & LAYOUTS

[SEE ATTACHED]