

SOUTH CAROLINA EXPORT INCENTIVES PROGRAM

The South Carolina Department of Commerce has developed an Export Incentives Program to help small and medium-sized businesses enter new markets and/or increase their exporting activities. The program reimburses eligible South Carolina companies for specific export-related expenses. Companies may only apply once a year.

ELIGIBILITY REQUIREMENTS

- » Meet the U.S. SBA's definition of a small business. (https://www.sba.gov/sites/default/files/files/Size_Standards_Table.pdf).
- » In business for at least two years.
- » Currently operating at a profit.
- » Headquartered in S.C. or manufacturing in S.C. with at least 51 percent U.S. content and 25 percent S.C. content.
- » Currently have an export/market-ready product.
- » Demonstrate an understanding of the costs associated with exporting and doing business with foreign purchasers.
- » In good standing with S.C. Department of Revenue or the Internal Revenue Service and able to certify eligibility for federal grants.
- » Companies that receive funding must be willing to report export sales data.

APPLY NOW—

**ELIGIBLE APPLICANTS MAY APPLY FROM
OCTOBER 1 THROUGH SEPTEMBER 1**

- » Activities covered include:
 - Select trade missions
 - International trade shows
 - U.S. Commercial Services' programs
 - Translation of website and marketing materials
- » The S.C. Department of Commerce will notify applicants, on a rolling basis, if they have been approved for funding and the reimbursement amount.
- » To learn more visit:
<http://scommerce.com/export-incentives>



U.S. Small Business
Administration



South Carolina
Department of Commerce

Just right for business.

FOR ADDITIONAL INFORMATION OR QUESTIONS, PLEASE CONTACT S.C. DEPARTMENT OF COMMERCE:

ANITA PATEL | TRADE PROGRAM MANAGER | APATEL@SCCOMMERCE.COM | WWW.SCCOMMERCE.COM
NORRIS THIGPEN | INTERNATIONAL TRADE MANAGER | NTHIGPEN@SCCOMMERCE.COM

Funded in part through a Grant with the U.S. Small Business Administration.

South Carolina Export Incentives Program Application Form 2018-2020

The South Carolina Department of Commerce (SCDOC) has developed an Export Incentives Program to assist small and medium sized businesses enter new markets and/or increase their exporting activities. The program reimburses eligible South Carolina companies for specific export-related expenses through the State Trade Expansion Program (STEP) or the South Carolina Opportunities for Promoting Exports (SCOPE) program. Companies may only apply once during the 2018-2020 period. Eligible applicants may apply from October 1, 2018 through September 1, 2020. All approved export related activity must be completed and submitted before September 29, 2020. Companies should not apply if receiving funding from other sources for the same event.

This application may be shared with the U.S. Commercial Service. Please attach any supporting materials (company marketing materials, statistics/research, copy of your export business plan, etc.) * **One application per company per grant year.** Eligible activities include: foreign trade shows, foreign trade missions, subscription services of the U.S. Commercial Service and export training. **Activities completed before application approval will not be funded.** Please be advised that not all applications will qualify or be approved for funding.

A. COMPANY & APPLICANT INFORMATION

Company Name:		(EIN #):
Street Address:		
City:	Zip Code:	
County:	Web Site:	
Primary Contact:	Title:	
Contact Tel:	Contact E-mail:	
Alternate Contact:	Title:	
Alternate Contact E-mail:	Alternate Contact Tel:	
How did you hear about this program: <i>(Please select all that apply)</i> <input type="checkbox"/> SCDOC <input type="checkbox"/> SBA <input type="checkbox"/> SBDC <input type="checkbox"/> USDOC <input type="checkbox"/> SCMEP <input type="checkbox"/> Local Economic Development <input type="checkbox"/> Other (specify) _____		
Company Activity: <i>(Please select all that apply)</i> <input type="checkbox"/> Manufacturer <input type="checkbox"/> Service Company <input type="checkbox"/> Distributor/Representative <input type="checkbox"/> Export Management Company <input type="checkbox"/> Other (please specify): _____		
Please indicate if your business is considered a Minority Business Enterprise (MBE): <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Native American <input type="checkbox"/> Asian Pacific American <input type="checkbox"/> Subcontinent Asian American		Veteran Owned Business? <input type="checkbox"/> Yes <input type="checkbox"/> No Women Owned ≥50%? <input type="checkbox"/> Yes <input type="checkbox"/> No Primary SIC/NAICS Code:
Year Established:	Corporate Headquarters in S.C.: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Number of Employees (FTE) in S.C.:	Number of (FTE) Employees Globally:	
If your company is foreign owned, please indicate the parent company and country. <input type="checkbox"/> Yes <input type="checkbox"/> No Parent Company: _____ Country: _____		
Of total employees, how many are engaged in the exporting aspect of the business:		
Please indicate the range of your company's annual sales: <input type="checkbox"/> Less than \$250,000 <input type="checkbox"/> \$250,000 to \$500,000 <input type="checkbox"/> \$500,000 to \$1 Million <input type="checkbox"/> \$1 to \$5 Million <input type="checkbox"/> \$5 to \$10 Million <input type="checkbox"/> \$10 to \$25 Million <input type="checkbox"/> Over \$25 Million		

Is this business an affiliate or subsidiary of another company? _____ If yes, state name of the parent company and headquarters location. _____
Brief Company Description: <i>(please feel free to attach additional information)</i>
Have you requested funding before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when was the last request? _____
Are you seeking or plan to seek funding from any other state or federal organization (such as SUSTA, ARC, STEP funding from another state) for the same activity? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please indicate below for what activity and how much funding you have or will request:
The US Small Business Administration (SBA) would like to give eligible small business concerns the opportunity to expand your knowledge and resources of other programs that are offered by the agency. Please check the appropriate box if you would like for your company's name and contact information to be shared with other programs offered by SBA. Your choice to participate or not, will not change the status of your participation with STEP. SBA's aim is strictly to share information about other opportunities with you. <input type="checkbox"/> Yes <input type="checkbox"/> No

B. EXPORT INFORMATION

Approximate percentage of export sales: <input type="checkbox"/> 0% <input type="checkbox"/> 1-5% <input type="checkbox"/> 5-10% <input type="checkbox"/> 11-25% <input type="checkbox"/> 26-50% <input type="checkbox"/> >50%
What is your export experience? <input type="checkbox"/> New to Export (0 to 2 markets) <input type="checkbox"/> Experienced Exporter (>2 markets)
Please explain your export goals for 2018-2020: <i>(please feel free to attach additional information)</i> <i>Companies must have an export plan in place in order to participate in S.C.'s export incentive program.</i>

Do your employees have the skills/experience to support and implement the above export plan? <input type="checkbox"/> Yes <input type="checkbox"/> No
To what countries do you currently export?
What countries do you feel are your top five export opportunities?

C. PRODUCT/SERVICE INFORMATION

HS Code(s):
Does your product contain at least 51% U.S. content? <input type="checkbox"/> Yes <input type="checkbox"/> No Does your product contain at least 25% S.C. content? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Products must have a content consisting of 51% or more of U.S. and at least 25% S.C. produced or manufactured parts, labor and or value-added content or any combination thereof.</i>
Describe the product/service(s) you seek to export, including its competitive advantages and unique selling proposition. Include its applications and unique features that differentiate your product from that of the competition.
Who are your major competitors abroad?
Explain how your product is distributed and marketed in other countries (and in the U.S. if applicable)?
What type of licensing or registration does your product require in the U.S. (and in other countries if applicable)?

D. SELECTION OF TRADE ACTIVITY

As part of the Export Incentive program, qualified businesses may apply for **reimbursement for package 1 OR 2** below and then choose from the training and add-ons. All services/activities have set reimbursement amounts and may not cover the full cost. Travel will only be provided for one activity per grant year (mission, trade show or US Commercial Service program).

Package 1: Trade Missions/U.S. Commercial Service Programs (pick 1) *Reimbursement will include mission/service fee and a travel stipend for hotel and airfare when applicable.*

- ☐ TradeWinds Indo Pacific, May 2019
- ☐ Canada, May 2019
- ☐ Mexico, August 2019
- ☐ Canada, May 2020
- ☐ South Korea and Vietnam, August 2020
- ☐ U.S. Commercial Service Programs _____

Package 2: Trade Shows (pick 1) *Reimbursement will include booth space and a travel stipend for hotel and airfare.*

Arab Health, UAE, January 2019 - The South Carolina Department of Commerce will recruit 4 eligible small businesses to have an exhibition booth space with Team South Carolina.

- ☐ **Paris Airshow, France, June 2019**- The South Carolina Department of Commerce will recruit 3 eligible small businesses to have an exhibition booth space with Team South Carolina. Companies must be a manufacturer or service provider in the aerospace, aviation industry to be considered.
- ☐ **International Trade Show:** Exhibit at an international trade show that best fit your industry. Trade shows must be a foreign trade show or an International Buyer Program (IBP) domestic show. A list of eligible IBP shows can be found here: <http://2016.export.gov/ibp/> Trade Show Name and Date: _____

Export Training

- ☐ Participation in S.C. District Export Council's general export seminars

Add-ons (pick up to 3)

- ☐ Website localization and/or SEO work
- ☐ Design or translation of marketing materials
- ☐ International Compliance Testing on Existing Products (testing must be completed within the grant year)

E. BUDGET

Activity Category	Estimated Expenses	Description/Name of Activity (from list of approved activities)
Trade Mission Fees		
U.S. Commercial Service Programs		
Trade Show (booth space only)		
Travel (airfare and hotel) <i>Hotel reimbursement based on per diem rate and airfare on economy class flights.</i>		
In-country transportation (excludes airfare from the U.S.)		
Interpreter fees		
Marketing Materials Design and/or translation		
Website Localization and/or SEO work		
International Compliance Testing on Existing Products		
Shipping Products/booth items for trade shows		
Export Training		
Total Estimated Expenses		

F. TRADE ACTIVITY DETAILS

For applicants that will participate in events that include international travel and lodging please respond to the following.

If international travel is involved, please name the travelers here*:

Is any traveler an elected official? Yes No

What date will you be leaving South Carolina?

What is the city and country of the destination?

What date will you depart the location of the trade events?

Has your company undertaken this event or activity in the past? ☐ Yes ☐ No If yes, when?

What type of business contacts are you seeking on this trip?

☐ Distributor

☐ Agent/Sales Representative

☐ Direct Sales

☐ Other _____

***Name of Traveling Employees. Limit of 2 (Travel expenses only cover employees of the company. Distributors, consultants, etc. are not covered). Travel information must be submitted 30 days prior to the start of travel. All funds under this program are reimbursed to the company not individuals. Please note: if a company has an outstanding tax lien with the South Carolina Department of Revenue or the Internal Revenue Services, in lieu of reimbursement to the company, payments will be remitted to these entities on behalf of the company.**

G. CERTIFICATION OF FEDERAL FORMS & REPORTING

Applications are processed and awarded on a rolling basis until all funds are expended. **Applications should be completed and submitted at least 60 days in advance of the start of any intended activity.** Applications will be reviewed and approved by an evaluation committee to determine the export potential of the candidate. Awards will be based on funds available, the number of applications submitted, and the strength and completeness of the applications. Late or incomplete applications will be deemed ineligible. Applications will be disqualified if a company has received an award for the same previously funded activity or if receiving funding from other source for the same activity.

SCDOC will notify applicants as to whether they have been approved for funding, and the dollar amount for which they may be reimbursed. In order to receive reimbursement, successful applicants must: respond to this notification confirming that they accept the amount awarded; follow-up on other paperwork needed for reimbursement—SBA self-representation form, DUNS number, statewide vendor number, etc.; execute proposed event/activity; submit completed reimbursement form along with receipts and required post-event survey to the SCDOC.

An officer of the applying company must sign applications. In addition, he/she certifies by signing below that they meet all the requirements under the S.C. Export Incentive Program to submit an application and that all information provided in this document, as well as any accompanying documents is true and complete. Applicant agrees to complete reporting requirements including disclosure of export sales and leads generated. Applicant must submit an IRS W-9 “Request for Taxpayer ID and Certification” if awarded grant funds. All funds must be approved in advance and are distributed as

Signature of Authorized Company Official

Date

Printed Name

Printed Title

Please Submit Application by Either Fax, Mail or Email to:

Anita Patel | Trade Program Manager | apatel@SCcommerce.com

Norris Thigpen | International Trade Manager | nthigpen@SCcommerce.com

1201 Main St., Suite 1600, | Columbia SC 29201

Fax: (803)737-0538 | Website: www.SCcommerce.com

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Administration

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Funded ☐ Yes or ☐ No

Date: _____



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Administration

SELF-REPRESENTATION AS AN 'ELIGIBLE SMALL BUSINESS CONCERN

The undersigned seeks services from a State grant recipient under the Trade Facilitation and Trade Enforcement Act of 2015 (HR 644) which authorized the State Trade Expansion Program (STEP).

Section 503 of the Trade Facilitation and Trade Enforcement Act of 2015 defines the term 'eligible small business concern,' as a business concern that:

1. Is organized or incorporated in the United States;
2. Is operating in the United States,
3. Meets
 - a. The applicable industry-based small business size standard established under section 3 of the Small Business Act; or
 - b. The alternate size standard applicable to the program under section 7(a) of the Small Business Act and the loan programs under title V of the Small Business Investment Act of 1958 (15 U.S.C. 695 et seq.);

The U.S. Small Business Administration (SBA) size standards are found at 13 C.F.R. Part 121. Use the following sba.gov link for information on size standards for your business

(<https://www.sba.gov/category/navigation-structure/contracting/contracting-officials//small-business-size-standards>)

4. Has been in business for not less than 1 year, as of the date on which assistance using a grant under this subsection commences; and
5. Has access to sufficient resources to bear the costs associated with trade, including the costs of packing, shipping, freight forwarding, and customs brokers.

The undersigned certifies that this is an export ready U.S. company seeking to export goods or services of U.S. origin or have at least 51% U.S. content.

Submitting false information in order to obtain services from a STEP grant recipient is a violation of Federal law. If you submit false information the Government may seek criminal, civil, and/or administrative remedies against you, pursuant to 18 U.S.C. §§ 1001, 1040; and 31 U.S.C. §§ 3729-3733. The Government may elect to exclude you from further participation in certain Federal programs and contracts if you submit false information in connection with receiving services from a STEP grant recipient.

I hereby certify that the business I represent is seeking services from a STEP grant recipient and is an eligible small business concern,* pursuant to the above definition.

SIGNATURE

DATE

TITLE

COMPANY NAME

All SBA programs and services are extended to the public on a nondiscriminatory basis.



**Certification Regarding
Debarment, Suspension, Ineligibility and Voluntary Exclusion
Lower Tier Covered Transactions**

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 13 CFR Part 145. The regulations were published as Part VII of the May 26, 1988 *Federal Register* (pages 19160-19211). Copies of the regulations may be obtained by contacting the person to which this proposal is submitted.

(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS ON REVERSE)

- (1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for disbarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- (2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Business Name _____

Date _____

By _____
Name and Title of Authorized Representative

Signature of Authorized Representative

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations (13CFR Part 145).
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.