



## 2010-2011 N.C. Value-Added Cost Share - Equipment for Producers

### Application

#### **Application Process:**

1. Carefully review guidelines for N.C. Value-Added Cost Share-Equipment for Producers.
2. Contact N.C. Value-Added Cost Share program coordinator, Brittany Whitmire, to verify eligibility and funding availability prior to application submission.
3. Once eligibility and funding availability have been confirmed, complete all sections of this application and mail complete application packet to NCSU Value-Added Cost Share Program, 1065 Whitmire Road, Brevard, NC 28712.
  - Application packet must include an original application with supporting documents and three (3) additional copies.
  - Completed application packets must be **received by December 31, 2010**, in order to be considered.

For more information on NCVACS-Equipment, visit <http://www.ncmarketready.org> or contact Brittany Whitmire at [brittany\\_whitmire@ncsu.edu](mailto:brittany_whitmire@ncsu.edu) or 919-830-9557.

N.C. Value-Added Cost Share - Equipment for Producers: Application

Complete all sections of this application and mail complete application packet to NCSU Value-Added Cost Share Program, 1065 Whitmire Road, Brevard, NC 28712. Application packet must include an original application with supporting documents and three (3) additional copies. Completed application packets must be **received by December 31, 2010**, in order to be considered.

**SECTION I: GENERAL INFORMATION**

Type of Applicant (Select one; refer to N.C. Value-Added Cost Share-Equipment for Producers Guidelines for definitions.)

- Individual/Independent Producer(s)     Agricultural Producer Group
- Farmer/Rancher Cooperative             Majority-Controlled Producer-Based Business

Applicant or Organization Name: \_\_\_\_\_

- I am a permanent resident of N.C. (If applying as an independent producer).
- The organization is based in N.C. (If applying as anything other than an independent producer).

Mailing Address: \_\_\_\_\_

Physical Address (if different): \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Web site: \_\_\_\_\_

Authorized Representative (If different from above, for applicants other than independent producers):

\_\_\_\_\_

Have you applied for a USDA-VAPG since 2008?

- Yes (Application Year \_\_\_\_ Was proposal funded? \_\_\_\_ Type of VAPG (Plan. or W.C.) \_\_\_\_)
- No

How long has this value-added enterprise been in operation? \_\_\_\_ Years \_\_\_\_ Months

Are you or any members of your group a current or former tobacco grower or quota holder?

- Yes (If so, how many? \_\_\_\_\_)
- No
- I don't know.

Are you currently receiving financial assistance from any other project funded by the N.C. Tobacco Trust Fund Commission or the N.C. Rural Economic Development Center?

- Yes (Please explain assistance on a separate page and attach to completed application.)
- No

**SECTION II: COST SHARE REQUEST INFORMATION**

a) Define the value-added segment of your agricultural enterprise, providing only information that is pertinent to the value-added aspect of your enterprise, not the whole farm. Please include a description of how your activity qualifies as value-added in one of the following categories: 1) change in the physical state of an agricultural commodity, 2) use of a recognized nonstandard method of production, 3) physical product segregation, 4) farm-based renewable energy generation, or 5) aggregation and marketing of locally grown agricultural food products. *(Refer to N.C. Value-Added Cost Share-Equipment for Producers Guidelines for further description of each category.)*

b) Describe the equipment for which you are requesting cost share funding and how that equipment will affect your operation.

- c) **What is the total estimated cost of the equipment that you plan to purchase with the assistance of NCVACS-Equipment funds? Is the equipment new or used? If new equipment, please attach two (2) estimates or price quotes, including specification sheets and photo(s) and/or diagram(s); if used equipment, please attach a copy of an independent, third-party appraisal, including photo(s) and/or diagram(s), and proof of clear ownership. NOTE: The professional appraiser must be approved by N.C. MarketReady. Submit credentials by completing Section V of this application, "Appraiser Certification".**



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<b>e) Table 2</b>				
<b>How much of your value-added product do you expect to produce annually? How much will it cost to produce that product, including all of the “inputs” required? What income do you expect from sales?</b>				
Consider all of your costs and sales income for the value-added segment of your enterprise only, not for the whole farm. Feel free to include additional lines in the template below so that you can be as specific as possible or insert a 2-year projected income statement that includes both production data for current operations and projected data for operations with the addition of the requested equipment. <i>You may develop an income statement from software you currently use (Excel, Quickbooks, etc.) provided that all the requested categories are included.</i>				
	Year 1		Year 2	
	Current Projection	Projection With Cost Share	Current Projection	Projection with Cost Share
Estimated Gross Revenue (From Table 1)				
<b>Input Costs or Expenditures</b>				
Cost of Goods – Raw agricultural commodity to which value is added				
Inventory (Supplies, ingredients, etc.)				
Utilities (Include electricity, Internet, phone, water, etc.)				
Labor (Include temporary, hourly, and salary employees plus benefits)				
Packaging				
Delivery (Freight, contractors, postage, etc.)				
Transportation to Market/Point of Sale				
Specialized Storage				
Professional Services				
Insurance				
Taxes				
Fees				
Interest on Debt				
Other:				
<b>Total Expenditures</b>				
<b>Revenue - Expenditures</b>				

- f) **Is there any additional information about your value-added equipment need(s) that you'd like to share that may help the review committee better understand your request? Are there specific financial needs that merit attention in the review process? If so, please describe.**

**SECTION III: CERTIFICATION OF MATCHING FUNDS**

Equipment purchases must be made by April 1, 2011. Applicants must certify that matching funds will be available at the same time cost share funds are anticipated to be spent by completing the following statement:

The N.C. Value-Added Cost Share Program will award cost share funds of 25 to 50 percent of the cost of equipment as outlined in Table 1 of the 2010-2011 NCVACS-Equipment Guidelines. Recipient matching funds must be spent in advance of cost share funding. Once a recipient verifies that matching funds have been expended, the cost share funding may be issued to the recipient on a reimbursement basis. Recipients will verify their expenditures by submitting copies of receipts, canceled checks or paid invoices.

I, \_\_\_\_\_ (signature of applicant or authorized representative), certify that matching funds will be available at the same time cost share funds are anticipated to be spent and that matching funds will be spent in advance of cost share funding.

**SECTION IV: VERIFICATION**

*Applicants must sign the following statements that will bind the applicant/applicant organization to the representations made in the application.*

The information provided in this application is correct and complete, and the person signing this application is authorized to bind the applicant.

The applicant assures N.C. MarketReady that it will permit audits and site visits for the enterprise described in this application for a period of up to five years from the date of the award. The applicant also agrees to provide information to N.C. MarketReady that may be used to create case studies for educational and reporting purposes for the same period of up to five years from the date of the award.

The applicant agrees to maintain ownership of the equipment purchased with the assistance of an NCVACS-Equipment award for a minimum of two years from the date of purchase. The applicant also agrees to maintain records of the project for a five-year period, beginning at the NCVACS-Equipment award date. NCVACS, the N.C. Tobacco Trust Fund Commission and the N.C. Rural Economic Development Center reserve the right to review any records related to the NCVACS project during this period.

The applicant understands that this application and all attachments submitted with this initial application are public record.

Signature of applicant or authorized representative:

Name: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION V: APPRAISER CERTIFICATION**

*To be completed by appraiser if NCVACS-Equipment funds are to be applied to used equipment.*

Name: \_\_\_\_\_

Business Name (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address (if different): \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Web site: \_\_\_\_\_

Appraisal Certifications: \_\_\_\_\_

\_\_\_\_\_

Membership in professional organizations for appraisers: \_\_\_\_\_

\_\_\_\_\_

**Conflict of Interest Disclosure**

I, \_\_\_\_\_ (printed name), understand that I may not enter into a contract or participate in any discussion or activity in which I or a member of my immediate family has potential conflict of interest due to having material economic involvement. When such a situation presents itself, I understand that I must report the potential conflict of interest to the N.C. Value-Added Cost Share program coordinator immediately. I also understand that the program coordinator is expected to make inquiry if such conflict appears to exist and I have not made it known. If applicable, please describe below any relationships, positions or circumstances in which you are involved that you believe could contribute to a conflict of interest arising with regard to the use of cost share funding.

*I hereby certify that the information set forth above is true and complete to the best of my knowledge.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**REQUIRED ATTACHMENTS:**

If applying for NCVACS-Equipment funds that will be applied to *new* equipment, please attach the following:

- At least two (2) estimates or quotes that include specification sheets
- Photo(s) and/or Diagram(s)

If applying for NCVACS-Equipment funds that will be applied to *used* equipment, please attach the following:

- Third-party appraisal (along with completed Section V in this application)
- Photo(s) and/or Diagram(s)

For more information on the N.C. Value-Added Cost Share Program, visit [www.ncmarketready.org](http://www.ncmarketready.org) or contact Brittany Whitmire at 919-830-9557 or [brittany\\_whitmire@ncsu.edu](mailto:brittany_whitmire@ncsu.edu).