

**SCRA Small Business Innovation Research (SBIR)
and Small Business Technology Transfer Research (STTR)
Phase I Matching Grant Program**

APPLICATION



Section 1

Date:

Company Name (referred to as “Applicant”):

Company Street Address:

City:

State:

Zip + 4 Digit Code ([Look-up code here](#)):

Work Phone:

Mobile:

Company Primary Point of Contact:

Company Primary Point of Contact Email:

Section 2

Legal Structure (Refer to Solicitation for eligibility):

If you selected other, please specify:

Does this business have its principal place of business in South Carolina and no less than fifty-one percent (51%) of its payroll, as defined in the Solicitation, located in South Carolina?

Will, at a minimum, fifty-one percent (51%) of the activities conducted under Phase I be performed in South Carolina?

Does the Company have any overdue tax debts?

Has the Company received official notification of Phase I award by the Federal SBIR/STTR agency for which Matching Grant funding is sought?

Program:

Fast-Track?

Section 3

Project Title:

Funding Federal Agency:

Solicitation Number:

Web-Link to Solicitation:

Date Awarded:

Total Federal SBIR/STTR Award Amount:

Performance period start date:

Finish date:

Name of Principal Investigator(s) (P.I.):



**SCRA SBIR/STTR Phase I Matching Grant
Program Application FY 2019**

Use of Matching Grant Funds:

Applicant is to submit a Use of Matching Grant Funds attachment (not to exceed 2 pages) that includes:

- (1) Description of the work plan/specific aims for the Matching Grant funds in non-technical terms, including deliverables, metrics for success, and the budget subtotal for each component of the work plan/aim
- (2) Timeline for deliverables by Applicant and all contractors/subcontractors/consultants
- (3) List all contractors/subcontractors/consultants, (including addresses) for the Matching Grant funds; if Matching Grant funds will be distributed to parties outside of South Carolina, justify the need to go outside the state
- (4) Projected impact of the Matching Grant funds on the scope and success of the project
- (5) Description of the benefits that the company may provide to South Carolina
- (6) Description of funds the company is contributing to the project in addition to the Federal award
- (7) Detailed budget for the Matching Grant funds, broken down by equipment, supplies, consultants, contract research organizations, travel, and intellectual property expenses; salaries and rent are not allowable expenses

The Applicant certifies that all statements, representations, and warranties made by the Applicant, or on its behalf, and any materials furnished by the Applicant or on its behalf in connection with this application (referred to as "Application"), are true, accurate and complete in all material respects, and do not contain any material misstatement of fact or omit to state a material fact or any fact necessary to make the statements contained herein or therein not materially misleading, to the best of the Applicant's knowledge and belief.

The Applicant certifies that it has reviewed and understands the Solicitation for the SCRA SBIR/STTR Phase I Matching Grant Program, and that it meets all the applicable eligibility requirements.

The Applicant certifies that there is no scientific, budgetary, or commitment overlap between this Application and the Applicant's other support, including all financial resources, whether Federal, non-Federal, commercial or institutional, available in direct support of an individual's research endeavors, including but not limited to research grants, cooperative agreements, contracts, and/or institutional awards.

The Applicant understands that disbursement of funds is based upon the Applicant's compliance with the terms outlined in the Solicitation and may be subject to recapture for non-compliance.

The Applicant acknowledges and accepts SCRA's absolute right in its sole discretion to withhold, discontinue, or retract and recover in part or in full any monies awarded and/or distributed pursuant to the SBIR/STTR Phase I Matching Grant Program if it is determined that the Applicant has engaged in unlawful conduct or conduct which violates the spirit and intent of the Matching Grant Program.

Name of authorized company official (Please type):

Title of authorized company official:

Signature authorized company official: _____

(please sign)

Date Signed:

E-mail address:



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Estimated Job Impact - Number of full-time equivalent jobs				
Types of employees If funding is received, what is the number of jobs expected to be created in the following categories, if any?	Current number of employees per category	Current number of employees in South Carolina (if different from column to left)	Total employees estimated under Phase I (With SCRA SBIR/STTR Phase I Matching Grant funds)	Total employees estimated under Phase II
a) Professional / Scientific				
b) Management				
c) Technical / Technician				
d) Skilled labor				
e) Unskilled labor				
f) Other (please describe)				

Section 5

Type(s) of intellectual property protecting the project (you may select more than one):

Trade Secret Trademark Patent None

Provide listing of pending and issued patent applications:

Does your company plan to manufacture/produce your product/service in South Carolina?

If you selected “No,” please explain why not:

Section 6

Is there a similar product/process on the market today?

If you selected “Yes,” please detail how your product differentiates from the competition.

Section 7

What is your go-to-market funding plan?

Is your company actively pursuing other sources of funding?

If the answer is “Yes,” please describe the nature and approximate dollar value of the funding and its status:

