

Additional Question this year:

Pre-Qualification Questions

Have you completed the CESMII Technology Readiness Assessment?

**Is your business in good standing
with the State of Maryland?**

**Do you have a physical location in
Maryland?**

**Do you have between 3 and 250
full-time employees (defined as
an employee who works at least
1,800 hours in a 12-month
period)?**

**Has your business been
established for at least two
years?**

**Have you previously received a
M4 grant from the Maryland
Department of Commerce?**

BUSINESS INFORMATION

Legal Business Name

Contact Name

Contact Title

Physical Address

Maryland County

Contact Telephone (Day)

Contact Mobile Phone

Contact Email

Federal Tax ID #/EIN

**Unemployment Insurance Number
(UIN)**

Legal Form of Business

Date Founded

NAICS Code

If you changed the NAICS code to a manufacturing code after the opening of your business, please outline when it was changed and the steps you took to change it.

Number of Current Full-time Employees

PROJECT DESCRIPTION

Describe your business and what product(s) you currently manufacture in Maryland

Provide an executive summary of the manufacturing project. Describe the project for which you are requesting funds. Provide details on how the project funds will be used, and how it relates to the business's overall Industry 4.0 strategy.

Describe how the project will credibly leverage technology to improve production capacity, capability, speed, or quality.

Which Industry 4.0 technologies are being deployed in the project?

Describe any consultative and training requirements associated with the successful completion of this project. If not applicable, please write N/A.

Describe any energy efficiency or sustainability improvements provided by the project (if any). If not applicable, please write N/A.

Have you identified any partners or 3rd party providers who can help you achieve these training, implementation and consultative needs?

Describe anticipated impact on staffing positions (full-time, part-time, contract, exempt and non-exempt). Do you anticipate that positions will be created, re-skilled or otherwise impacted?

PROJECT BUDGET

Total Project Cost

Total Grant Request

Company Cost Share (see General Terms and Conditions below)

BREAKDOWN OF COSTS

Purchased Equipment Costs

**Infrastructure and facilities
improvements Cost**

Project Consulting Fees

Employee Training Costs

Other Costs

PROJECT PLAN

What is your forecasted timeline for project implementation, completion, and significant milestones if awarded this grant?

Risks: What are the major risks associated with the project and what measures will be in place to mitigate the risks?

Experience: Describe applicant's prior experience with other projects of similar scope, scale and complexity. Please identify the internal staff responsible for project oversight and implementation and speak to their capacity to handle the project.

Only Maryland Manufacturers who plan to modernize production at a facility in Maryland are eligible for this grant program. Please affirm this grant would be used to further modernize, implement, or expand Industry 4.0 technologies manufacturing facility to produce products in Maryland.

Would you be interested in additional technical assessment or assistance with your project plans?

SUPPORTING DOCUMENTATION

Detailed Sources and Uses of Fund statement

Annual Revenues of the business and current cash available to perform matching funds as evidenced by Financial Statements or other financial documentation.

Documentation to substantiate years in business

Project cost documentation to include contracts, vendor quotes, etc

Equipment or product specification sheets (where applicable)

IRS Form W-9

Certificate of Good Standing

APPLICATION AFFIDAVIT

Has the Applicant, or any partner, director, officer, member, principal stockholder or guarantor:

Been convicted of a criminal offense other than a traffic violation? =
Been a debtor in bankruptcy or insolvency proceedings? =
Been a party to any pending litigation in the past two years? =
Do any of the aforementioned parties owe any outstanding judgments? =
Do you have unresolved OSHA or MOSH violations that originated within the past five years? =

Do any of the aforementioned parties owe any delinquent taxes?

Signature of Authorized Representative and Affiant

Name

Title

Date

AGREEMENTS AND CERTIFICATIONS

Applicant's Correct Legal Name

Authorized By

Name

Title

Date

ELECTRONIC COMPLIANCE NOTIFICATION

Electronic Notifications

**Would you like to receive emails
with news and business
resources from the State of
Maryland?**

Additional Information on Applicant (Not Required)

**Respondent wishes to furnish
this information**
