

Maryland Manufacturing 4.0 (M4) Grant Program

Description, eligibility and application

401 East Pratt Street, Baltimore, Maryland 21202
commerce.maryland.gov

Larry Hogan, Governor | Boyd Rutherford, Lt. Governor
R. Michael Gill, Secretary



PROGRAM DESCRIPTION AND ELIGIBILITY:

This \$1 million incentive program helps Maryland manufacturers with the need to adopt Industry 4.0-related technologies; machinery and robotics; and digital business practices in order to remain competitive and drive growth. Projects must clearly demonstrate a tie to Industry 4.0, and a long term strategy for Industry 4.0 adoption.

Grants would be 50% of qualified project costs, with a minimum grant award of \$15,000 (total project cost of \$30,000) and a maximum grant award of \$50,000 (total project cost of \$100,000).

Examples of qualified investments include:

- Big Data & Analytics - investing in systems that allow manufacturers to better analyze the data collected within their operation, turning data into actionable insights that drive better decision-making
- Robots and autonomous equipment to help automate workflow (replacement of existing equipment would not be qualified)
- Implementation of Industrial Internet of Things technologies such as shop floor data sensors, smart warehouse, or new quality control systems
- Adoption of additive manufacturing
- Simulation/Digital Twins to enable predictive maintenance, test ideas for operational changes, etc.
- Systems integration projects - either vertically sharing data within the organization to improve efficiencies, or horizontally across supply chains
- Virtual and Augmented Reality
- Employee training and /or consulting costs associated with the implementation of the new systems/ technologies/equipment

Eligibility: To be eligible for an M4 grant, your business must meet all of the following requirements:

1. Be an existing business in good standing with the State of Maryland,
2. Have between 3 and 150 full-time employees (defined as an employee who works at least 1,800 hours in a 12-month period)
3. Have minimum annual revenue of \$1m, not including grant funding,
4. Have a two-digit NAICS code of 31-33,
5. Have been established for a minimum of 3 years,
6. Be in good standing with federal Occupational Safety and Health Administration and Maryland Occupational Safety and Health regulations
7. Demonstrate an ability to successfully implement the proposed project,
8. Demonstrate an overall commitment to, or strategy for, Industry 4.0 adoption, and
9. Demonstrate ability to provide matching funds.

General Terms and Conditions:

- Grants of up to \$50,000 will be made available to manufacturers to adopt new technologies, machinery and robotics, and digital business practices in order to remain competitive and drive growth.
- Grant awards will vary based on the applicant's total investment, not to exceed 50% of the total eligible project costs.
- Applicants must be an established Maryland manufacturing business and demonstrate experience, technical expertise and financial capacity to implement the proposed modernization project.
- Eligible costs include but are not limited to expenses such as machinery, equipment, software, implementation/installation costs, and training of employees on use of the new technology.
- Consultant fees directly associated with implementation of the eligible project costs, such as design and layout of new equipment, soft costs such as license fees, and training costs are permitted, and will be reviewed on a case-by-case basis.
- Funding decisions will be made based on a variety of evaluation criteria, including but not limited to technical capability, operational experience, and financial capacity supporting the project.
- Funds will be disbursed as follows: 50% at notice of award, with remaining 50% paid upon completion with proof of expenses.
- Grant awards are competitive and limited to available funds.

MARYLAND MANUFACTURING 4.0 (M4) PILOT PROGRAM

IF MORE SPACE IS NEEDED, YOU MAY ATTACH ADDITIONAL PAGES TO YOUR APPLICATION.

Section 1: Business Information

Legal Name: _____

Trade Name (DBA): _____

Physical Address: _____

City, State, Zip: _____

Mailing Address (if different than above): _____

City, State, Zip: _____

County: _____

Telephone (day): _____ Mobile: _____ Email: _____

Location Address of where the Industry 4.0 project will take place (if different from above): _____

City, State, Zip: _____

Fed.ID#: _____ Unemployment Insurance Number: _____

Legal Form of Business:

C Corporation

General Partnership

S Corporation

LLC

Joint Venture

Limited Partnership

LLP

Date Founded : _____ NAICS Code (six digits): _____

Current Full-time Employees (defined as an employee who works at least 1,800 hours in a 12-month period): _____

Section 2: Contact Information

Contact Name: _____ Title: _____

Phone Number: _____ Email: _____

Section 3: Project Description

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

Please 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. How will it improve product delivery or supplier reliability? How will it enhance customer service or engagement? How will it expand or optimize product mix or product performance? How will it enhance your competitive advantage? What metrics will you use to gauge success and what are your current projections for improvement in those metrics?

Which Industry 4.0 technologies are being deployed in the project? Check all that apply.

- Additive Manufacturing (3D Printing)
- Advanced Communications (5G, etc)
- Advanced Modeling
- Artificial Intelligence (AI)
- Augmented, Virtual or Mixed Reality
- Autonomous Robotics or Vehicles
- Big Data and Analytics
- Blockchain
- COBOTS
- Cybersecurity
- Digital Twin
- Industrial Internet of Things (IIoT)
- Machine Learning
- Machine Vision / Visual Inspection
- Sensor Technology
- Other:

Please describe any consultative and training requirements associated with the successful completion of this project.

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

- Yes No

If yes, please list them and their roles:

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?

Section 4: Project Budget - Refer to Section 6 (Supporting Documentation) for required documents to support your funding request.

Total Project Cost: _____ Total Grant Request: _____

Company Cost Share (must be at least 50% of grant request): _____

Other sources of project funds:

Breakdown of costs:

Purchased equipment: \$ _____

List any significant hard, physical asset that is being procured and installed and dedicated exclusively to this project. Include manufacturer, model, country/state of origin, vendor, useful life, and approximate cost. Cost should include original purchase only and not any maintenance, warranty or other extended service subscription or plan. Provide as an attachment if the list is large.

Software, Technology, or IP: \$ _____

Describe and estimate the cost for software, technology or other intellectual property only if it is 1) dedicated exclusively to this project, 2) necessary for the project to achieve its goals, and 3) can be accounted for as a capital expense, i.e. an asset with a useful life beyond the purchase year and is paid for as a lump sum rather than via a monthly or annual subscription. For listed items include vendor, product name and version, country/state of origin.

Infrastructure and facilities improvements: \$ _____

Describe and estimate cost for project line items only if they are directly and exclusively related to purchased equipment listed in the prior question and necessary for the equipment to perform its intended function.

Project Consulting Fees: \$ _____

Describe any consulting costs only if they are directly and exclusively related to purchased equipment, software or technology costs listed in the prior questions and necessary for project implementation/installation.

Employee Training Costs: \$ _____

Describe any employee training costs only if they are directly and exclusively related to purchased equipment, software or technology costs listed in the prior questions and necessary for project implementation/installation

Other costs (please detail): \$ _____

Section 5: 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.

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 to a Maryland-based manufacturing facility to produce products in Maryland.

Yes No

Section 6: Supporting Documentation

The applicant is required to submit the following information and may be required to submit additional information upon request.

- Detailed Sources and Uses of Fund statement
- Annual Revenues of the business as evidenced by Financial Statement or other financial documentation. (Reviewed or audited statements are preferred, internal statements will be accepted.)
- Project cost documentation to include contracts, vendor quotes, etc
- Equipment or product specification sheets (where applicable)
- IRS Form W-9
- Certificate of Good Standing (a dated screen shot is acceptable, and can be obtained at <https://egov.maryland.gov/BusinessExpress/EntitySearch>)

Section 7: Application Affidavit

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

1. been convicted of a criminal offense other than a traffic violation? Yes No
2. been a debtor in bankruptcy or insolvency proceedings? Yes No
3. been a party to any pending litigation in the past two years? Yes No
4. Do any of the aforementioned parties owe any outstanding judgments? Yes No
5. Do any of the aforementioned parties owe any delinquent taxes? Yes No

If yes to any of the above, please explain:

6. Do you have unresolved OSHA or MOSH violations that originated within the past five years? Yes No

A. AUTHORIZED REPRESENTATIVE: I HEREBY AFFIRM THAT I am the _____
and the duly authorized representative of _____ and that I possess the
legal authority to make this Affidavit on behalf of myself and the business for which I am acting.

B. CERTIFICATION OF CORPORATION REGISTRATION AND TAX PAYMENT: I FURTHER AFFIRM THAT:

(1) The business named above is a [corporation][] formed in [0 Maryland] [0 (other state:)] and registered in accordance with the Corporations and Associations Article, Annotated Code of Maryland, and that it is in good standing and has filed all of its annual reports, together with filing fees, with the Maryland State Department of Assessments and Taxation, and that the name and address of its resident agent filed with the State Department of Assessments and Taxation is:

Name (If not a corporation, state so): _____

Address: _____

2) Except as validly contested, the business has paid, or has arranged for payment of, all taxes due all government entities including the State of Maryland and has filed all required returns and reports with the Comptroller of Maryland, the State Department of Assessments and Taxation, the Department of Labor, Licensing and Regulation (DLLR) and all other taxing authorities, as applicable, and will have paid all withholding taxes due to the State of Maryland and all other government entities prior to final settlement.

C. AFFIRMATION REGARDING BRIBERY CONVICTIONS: I FURTHER AFFIRM THAT neither I, nor to the best of my knowledge, information, and belief, the above business, (as is defined in §16-101(b) of the State Finance and Procurement Article of the Annotated Code of Maryland), nor any of its officers, directors, or partners, nor any of its employees directly involved in obtaining or performing contracts with the public bodies (as is defined in §16-101(f) of the State Finance and Procurement Article of the Annotated Code of Maryland), has been convicted of, or has had probation before judgment imposed pursuant to Article 27, §641 of the Annotated Code of Maryland, or has pleaded nolo contendere to a charge of, bribery, attempted bribery, or conspiracy to bribe in violation of Maryland law, or of the law of any other state or federal law, except as follows [indicate the reasons why the affirmation cannot be given and list any conviction, plea, or imposition of probation before judgment with the date, court, official or administrative body, the sentence or disposition, the name(s) of the person(s) involved, and their current positions and responsibilities with the business]:

D. AFFIRMATION REGARDING OTHER CONVICTIONS: I FURTHER AFFIRM THAT neither I, nor to the best of my knowledge, information, and belief, the above business, nor any of its officers, directors, or partners, nor any of its employees directly involved in obtaining or performing contracts with public bodies, has:

(a) been convicted under the state or federal statute of a criminal offense incident to obtaining, attempting to obtain, or performing a public or private contract, fraud, embezzlement, theft, forgery, falsification or destruction of records, or receiving stolen property;

(b) been convicted of any criminal violation of a state or federal antitrust statute;

(c) been convicted under the provisions of Title 18 of the United States Code for violation of the Racketeer Influenced and Corrupt Organization Act, 18 U.S.C. §§1341, et seq., or Mail Fraud Act, 18 U.S.C. §§1341, et seq., for acts arising out of the submission of bids or proposals for a public or private contract;

(d) been convicted of a violation of the State Minority Business Enterprise Law, Section 14-308 of the State Finance and Procurement Article of the Annotated Code of Maryland;

(e) been convicted of conspiracy to commit any act or omission that would constitute grounds for conviction or liability under any law or statute described in subsection (a), (b), (c), or (d) above;

(f) been found civilly liable under a state or federal antitrust statute for acts or omissions in connection with the submission of bids or proposals for a public or private contract;

(g) admitted in writing or under oath, during the course of an official investigation or other proceeding, acts or omissions that would constitute grounds for conviction or liability under any law or statute described above, except as follows [indicate reasons why the affirmations cannot be given, and list any conviction, plea, or imposition of probation before judgment with the date, court, official or administrative body, the sentence or disposition, the name(s) of the person(s) involved and their current positions and responsibilities with the business, and the status of any debarment]:

E. AFFIRMATION REGARDING DEBARMENT: I FURTHER AFFIRM THAT neither I, nor to the best of my knowledge, information, and belief, the above business, nor any of its officers, directors, or partners, nor any of its employees directly involved in obtaining or performing contracts with public bodies, has ever been suspended or debarred (including being issued a limited denial of participation) by any public entity, except as follows [list each debarment or suspension providing the date of the suspension or debarment, the name of the public entity and the status of the proceedings, the name(s) of the person(s) involved and their current positions and responsibilities with the business, the grounds for the debarment or suspension, and the details of each person's involvement in any activity that formed the grounds for the debarment or suspension]:

F. AFFIRMATION REGARDING DEBARMENT OF RELATED ENTITIES: I FURTHER AFFIRM THAT:

- (1) The business was not established to, nor does it operate in a manner designed to, evade the application of or defeat the purpose of debarment pursuant to §§16-101, et seq., of the State Finance and Procurement Article of the Annotated Code of Maryland; and
- (2) The business is not a successor, assignee, subsidiary, or affiliate of a suspended or debarred business, except as follows [indicate the reasons(s) why the affirmations cannot be given without qualification]:

G. SUB-CONTRACT AFFIRMATION: I FURTHER AFFIRM THAT neither I, nor to the best of my knowledge, information, and belief, the above business, has knowingly entered into a contract with a public body under which a person debarred or suspended under Title 16 of the State Finance and Procurement Article of the Annotated Code of Maryland will provide, directly or indirectly, supplies, services, architectural services, construction related services, leases of real property, or construction.

H. ACKNOWLEDGMENT: I ACKNOWLEDGE THAT this Affidavit is to be furnished to the Department of Commerce and may be distributed to units and agents of (1) the State of Maryland; (2) counties or other subdivisions of the State of Maryland; (3) other states and their subdivisions; and (4) the federal government. I further acknowledge that this Affidavit is subject to applicable laws of the United States and the State of Maryland, both criminal and civil, and that nothing in this Affidavit or any agreement resulting from the submission of this application shall be construed to supersede, amend, modify, or waive, on behalf of the State of Maryland, or any unit or agent of the State of Maryland having jurisdiction, the exercise of any statutory right or remedy conferred by the Constitution and the laws of Maryland with respect to any misrepresentation made or any violation of the obligations, terms and covenants undertaken by the above business with respect to (1) this Affidavit, (2) the proposed contract, and (3) other Affidavits comprising part of the proposed contract.

I DO SOLEMNLY DECLARE AND AFFIRM UNDER THE PENALTIES OF PERJURY THAT THE CONTENTS OF THIS AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

(Name)

By: _____

(Authorized Representative and Affiant)

Name: _____

Title: _____

Date: _____

Section 8: Agreements and Certifications:

In Accordance with Executive Order 01.01.1983.18 the Department of Commerce advises you as follows regarding the collection of personal information:

Certain personal information requested by the Department of Commerce or its Agents, is necessary in determining your eligibility. Failure to disclose this information may result in the denial of these benefits or services. Availability of this information for public inspection is governed by the provisions of the Maryland Public Information Act, State Government Article, Sections 10-611 et seq. of the Annotated Code of Maryland. This information will be disclosed to appropriate staff of the Department, or to public officials, auditors of the Department's affairs and reinsurance companies for purposes directly connected with approval of the proposed financing and administration of the program for which its use is intended. Such information is routinely shared with State, federal or local government agencies. Information regarding job creation and retention may be shared with the public. You have the right to inspect, amend or correct personal records in accordance with the Maryland Public Information Act.

Certification: All information in this application and in the attached exhibits, attachments, and addendums is true and complete to the best of my/our knowledge, information, and belief. I/We agree to pay for the cost of any surveys, title or mortgage examinations, credit reports, lien searches, appraisals etc. that are necessary for consideration of this application. Further, I/we agree not to engage in employment practices which deny equal employment rights to persons by reason of (i) political or religious opinion or affiliation, marital status, race, color, creed or national origin; (ii) sex or age, except when sex or age constitutes a bona

vide occupational qualification; or (iii) physical or mental disability of a qualified individual with a disability. I/we agree to comply with the State's policy on maintaining a drug and alcohol free workplace. I hereby authorize all involved in the financing of this project to exchange freely without further authorization and consent, any and all financial information and reports provided in connection with this application and the processing of this loan request.

Applicant's Correct Legal Name: _____

Authorized By (Signature): _____

Name and Title: _____

Date: _____

Section 9: Electronic Compliance Notification:

Participation in electronic notification is voluntary and can be withdrawn at any time. However, in order to move forward with receiving billing invoices and other compliance notifications electronically, please check either the opt in or opt out box below:

Opt In: By checking this box, the Applicant is providing affirmative consent to the electronic delivery of invoicing and compliance notifications and to suspension of mailed paper copies of invoices and compliance notifications. The Applicant is further confirming that the Applicant is able to access, retain and print the invoices and compliance notifications electronically. The Department of Commerce ("Commerce") reserves the right to terminate the use of electronic invoicing and compliance notification, and return to hard copy invoicing and compliance notification, at its sole discretion.

Opt Out: By checking this box, the Applicant does not wish to receive electronic invoices or compliance notifications.

How to Withdraw Electronic Contact Consent: The Applicant may withdraw consent by contacting Commerce at 410-767-6355, fpaaworkflowcoordinator.commerce@maryland.gov or Department of Commerce, 401 E. Pratt Street, 17th Floor, Baltimore, MD 21202. At its option, Commerce may discontinue electronic delivery of invoices or compliance notifications if an email Commerce sends is returned undeliverable and Commerce does not receive an updated and verified email address within thirty (30) days, or if Commerce cannot otherwise reach the Applicant at the email address provided. Withdrawal of consent will be effective only after Commerce has a reasonable period of time to process the request, after which future invoices or compliance notifications will be provided or made available in paper form. Commerce will provide confirmation of the Applicant's withdrawal of consent and the date on which it takes effect to the email address the Applicant has provided or, if no email address is available, in paper form to the mailing address on the Applicant's account.

How to Update Electronic Contact Information. In the event the Applicant opts to receive electronic invoices and compliance notifications, it is the Applicant's responsibility to provide Commerce with an accurate email address. The Applicant may update electronic contact information by contacting Commerce by telephone at 410-767-6355 or by email at fpaaworkflowcoordinator.commerce@maryland.gov. Commerce will notify the Applicant of any change to the electronic contact information Commerce has on file. By opting to receive electronic invoices and compliance notifications, the Applicant understands and agrees that if Commerce sends an invoice or compliance notification to the Applicant electronically and the Applicant does not receive the invoice or compliance notification because (1) the Applicant's electronic contact information on file with Commerce is incorrect or out of date, (2) the email is blocked by the Applicant's service provider, or (3) the Applicant is otherwise unable to receive electronic communications, the electronic invoice or compliance notification will be deemed to have been delivered by Commerce and the Applicant will still be liable for the electronic invoice or compliance notification.

Exhibit A - Optional Statistical Data

This form is for gathering statistical data only. This form will be separated from the application and the information provided in it will not be a part of the application approval process. Furnishing this information is voluntary; failure to do so will have no effect on the approval of the requested financial assistance.

Respondent does not wish to furnish this information

If the applicant will be providing the requested financial assistance to another recipient (e.g. a facility user or borrower), "Respondent" should be the recipient of the financial assistance.

Is Respondent the APPLICANT and/or RECIPIENT (or FACILITY USER)

If Respondent is a business organization:

If Respondent is a business owned and controlled primarily by individuals who are identified in any of the following categories, please check all the categories that apply:

Female

Of Hispanic or Latino origin

American Indian or Alaska Native

Asian Black or African American

Native Hawaiian or other

Pacific Islander

White

Veteran

Is the Respondent a State/Federal/Other certified Minority Business Enterprise?

Yes No

If yes, please provide your:

State MBE certification number: _____

Federal 8(a)/SDB certification number: _____

Identify who the other issuer is and the other certification number: _____

Respondent is a publicly held entity or other organization not classifiable as owned by individuals of a particular gender, race, ethnicity, or veteran status.

If the Respondent is an individual:

Is the Respondent Female? Yes No

Is the Respondent of Hispanic or Latino origin? Yes No

Is the Respondent a Veteran? Yes No

Which of the following categories describes the Respondent (multiracial respondents may select all applicable racial categories):

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or other Pacific Islander

White

FOR DEPARTMENT USE ONLY:

Respondent Name: _____ Date: _____

Recommendation: _____

Completed applications should
be submitted by email to:

m4grant.commerce@maryland.gov

