

# COLD STORAGE COST SHARE PROGRAM

## Participant Application

The South Carolina Department of Agriculture and South Carolina Specialty Crop Growers Association are pleased to announce continued funding for the Cold Storage Cost Share Program. Through the USDA Specialty Crop Block Grant Program, farmers who are members of the South Carolina Specialty Crop Growers Association may receive reimbursement up to \$750 for the purchasing and installing up to two (2) Cool Bot cooler systems. Nonmembers may receive reimbursement up to \$325, for installing one (1) Cool Bot cooler system.

The Cool-Bot utilizes a traditional window-unit air conditioner, multiple sensors, a heating element, and a programmed micro-controller to direct your air conditioner’s compressor to cool the room to 36° F, without ever freezing up.

### FOR REIMBURSEMENT, THE FOLLOWING IS REQUIRED:

- Must be South Carolina farmer and grow specialty crops. The USDA defines specialty crops as “fruits and vegetables, tree nuts, dried fruits, horticulture, and nursery crops (including floriculture).”

- Attended a food safety workshop hosted by SCDA or Clemson Extension within the past two (2) years. Proof of attendance must be provided in application for reimbursement.
- Sign an affidavit with SCDA to ensure the cold storage unit will be used solely for the handling, holding, and distribution of specialty crops.
- Provide primary source receipts for all expenditures related to installation of the cold storage technology unit.
- Provide photos of the completed cold storage unit showing the Cool-Bot system. Mail to address provided or email to [mcraford@scda.sc.gov](mailto:mcraford@scda.sc.gov)
- Enable an on-site audit by a SCDA person to authenticate cold storage technology is being used solely for specialty crops.
- Provide data, information, statistics, and/or testimonials after six months and twelve months of installation of the cold storage unit to SCDA for the purpose of tracking project success.

Name \_\_\_\_\_

Farm Name \_\_\_\_\_

Physical Address \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_  
(If different from above)

Phone Number(s) \_\_\_\_\_ Email \_\_\_\_\_

State Vendor Registration Number \_\_\_\_\_

Each company requesting reimbursement must obtain a State of SC Vendor Number. This process is free and can be completed at [procurement.sc.gov/doing-biz/registration](http://procurement.sc.gov/doing-biz/registration).

Reimbursement Amount Requested \_\_\_\_\_

Please include receipts or other documentation of all expenditures associated with the installation of your cold storage unit with the application.

Are you a member of the SC Specialty Crop Growers Association?  Yes  No

SC Specialty Crop Growers Association members may be given preference.

List of Specialty Crops Grown \_\_\_\_\_

### COLD STORAGE COST SHARE PROGRAM TERMS AND AGREEMENTS

Through my signature below, I acknowledge that I have read and agree to the terms during the application process and throughout my participation in the Cold Storage Cost Share Program.

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

STATE OF SOUTH CAROLINA )

AFFIDAVIT

COUNTY OF \_\_\_\_\_ )

PERSONALLY appeared before me, the undersigned notary public, \_\_\_\_\_, who, first being duly sworn, deposes and states under penalty of perjury as follows:

1. My name is \_\_\_\_\_ and my physical address is \_\_\_\_\_, located in \_\_\_\_\_ County, South Carolina.
2. I am the principal and owner of, and make this affidavit on behalf of \_\_\_\_\_ (farm or business name) (herein referred to as the "Farm").
3. I am over 18 years old and competent to make this affidavit. I am authorized by the Farm to make this affidavit and do so on my own behalf and on behalf of the Farm. Any references herein to "I" shall include myself and the Farm.
4. The Farm is a grower of "Specialty Crops" as defined by Section 101 of the Specialty Crops Competitiveness Act of 2004 (7 U.S.C. 1621 note) and amended under section 10010 of the Agricultural Act of 2014, Public Law 113-79 (the Farm Bill).
5. The Farm has completed a food safety workshop hosted by SCDA or Clemson Extension.
6. The Farm is a participant in the Cold Storage Cost Share Program (the "Program"), funded through the United States Department of Agriculture's Specialty Crop Block Grant.
7. Any Cool-Bot cold storage technology unit installed by the Farm as part of the Program will be used solely for the handling, holding, and distribution of Specialty Crops.
8. I certify the accuracy of any and all documents, records, and information provided by the Farm or myself for purposes of applying for a cost-share reimbursement grant under the Program.
9. I fully understand and acknowledge that reimbursement through the Program requires that I only use the Cool-Bot cold storage technology unit for Specialty Crops and that I may not use it for other purposes.
10. I fully understand and acknowledge that if it is found that I knowingly provided false information to obtain a grant funds under the Program or if I use the Cool-Bot cold storage technology unit for items not considered a Specialty Crop, that I am subject to repayment of any grant dollars I received under the Program and I may be subject to prosecution in Magistrate Court.

FURTHER AFFIANT SAYETH NOT.

Signature of Affiant \_\_\_\_\_

SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Printed Notary Name \_\_\_\_\_

Notary Public for the State of \_\_\_\_\_

My Commission Expires \_\_\_\_\_

Notary Stamp Here

**RETURN COMPLETED APPLICATION TO**

Michael Cranford, SCDA Marketing Specialist  
South Carolina Department of Agriculture  
PO Box 11280, Columbia, SC 29211  
[mcranford@scda.sc.gov](mailto:mcranford@scda.sc.gov)

*Save this form to your computer first before submitting.  
Do not submit from an internet browser.*

**SCDA GRANTS ADMINISTRATION USE ONLY**

Approved       Not Approved

Amount to Pay \_\_\_\_\_ Date \_\_\_\_\_

Authorized By \_\_\_\_\_