

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82



Fiscal Year 2018-19 Agency Budget Plan

FORM A - BUDGET PLAN SUMMARY

OPERATING REQUESTS (FORM B1)	For FY 2018-19, my agency is (mark "X"): <input checked="" type="checkbox"/> Requesting General Fund Appropriations. <input checked="" type="checkbox"/> Requesting Federal/Other Authorization. <input type="checkbox"/> Not requesting any changes.
NON-RECURRING REQUESTS (FORM B2)	For FY 2018-19, my agency is (mark "X"): <input checked="" type="checkbox"/> Requesting Non-Recurring Appropriations. <input type="checkbox"/> Requesting Non-Recurring Federal/Other Authorization. <input type="checkbox"/> Not requesting any changes.
CAPITAL REQUESTS (FORM C)	For FY 2018-19, my agency is (mark "X"): <input checked="" type="checkbox"/> Requesting funding for Capital Projects. <input type="checkbox"/> Not requesting any changes.
PROVISOS (FORM D)	For FY 2018-19, my agency is (mark "X"): <input checked="" type="checkbox"/> Requesting a new proviso and/or substantive changes to existing provisos. <input checked="" type="checkbox"/> Only requesting technical proviso changes (such as date references). <input type="checkbox"/> Not requesting any proviso changes.

Please identify your agency's preferred contacts for this year's budget process.

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
PRIMARY CONTACT:	Debra Baker	803-896-3845	Debra.Baker@SCDMV.net
SECONDARY CONTACT:	Krissi Wicker <i>Krissi Wicker</i>	803-896-3844	Kristen.Wicker@SCDMV.net

I have reviewed and approved the enclosed FY 2018-19 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

	<u>Agency Director</u>	<u>Board or Commission Chair</u>
SIGN/DATE:		
TYPE/PRINT NAME:	Kevin A. Shwedo Executive Director	

This form must be signed by the agency head – not a delegate.

Fiscal Year 2018-19 Budget Request Executive Summary

Agency Code:
Agency Name:
Section:

R40
South Carolina Department of Motor Vehicles

BUDGET REQUESTS			FUNDING				FTES					
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	B2 - Non-Recurring	REAL ID Non-Recurring	5,637,990				5,637,990					0.00
2	B1 - Recurring	REAL ID Recurring	379,122				379,122	9.00				9.00
3	B1 - Recurring	Exchange Earmarked Authority for General Funds	2,500,000		(2,500,000)		0					0.00
4	B1 - Recurring	Plate Replacement Authority ONLY			1,300,000		1,300,000					0.00
5	B1 - Recurring	Moped Bill - Recurring	428,000				428,000	2.00				2.00
6	B2 - Non-Recurring	Roads Bill - Non-Recurring	330,800				330,800					0.00
7	B1 - Recurring	Roads Bill - Recurring	220,500				220,500	4.00				4.00
8	B2 - Non-Recurring	TERI Payouts	412,450				412,450					0.00
9	C - Capital	Statewide HVAC Upgrade Project	200,000				200,000					0.00
10	B2 - Non-Recurring	Business Continuity	170,000				170,000					0.00
11							0					0.00
12							0					0.00
13							0					0.00
14							0					0.00
15							0					0.00
16							0					0.00
17							0					0.00
18							0					0.00
19							0					0.00
20							0					0.00
21							0					0.00
22							0					0.00
23							0					0.00
24							0					0.00
25							0					0.00
26							0					0.00
27							0					0.00
28							0					0.00
29							0					0.00
30							0					0.00
TOTAL BUDGET REQUESTS			10,278,862	0	(1,200,000)	0	9,078,862	15.00	0.00	0.00	0.00	15.00

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	2- Form#13489
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	REAL ID - Recurring
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$379,122 Federal: Other: Total: \$379,122
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What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	9 FTEs
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:	
	<input type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input checked="" type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input checked="" type="checkbox"/>	Consulted DTO during development
	<input checked="" type="checkbox"/>	Related to a Non-Recurring request – If so, Priority # <u>_1</u>

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input checked="" type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
	<input checked="" type="checkbox"/>	Government and Citizens

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

ACCOUNTABILITY OF FUNDS	<p>SC has passed REAL ID. To implement REAL ID, DMV needs the following recurring operating requests.</p> <p>The REAL ID request advances information security and accessibility and the project will use external auditing as a means to ensure compliance with state and federal laws and regulations (SCDMV Objective 6.1.6).</p> <p>Successful evaluation would be determined once all systems required for REAL ID are fully operational.</p>
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What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	DMV Employees and vendors
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	<p>9 FTE's are needed to operate the State to State Help Desk. Existing vacancies are insufficient due to the conversion of between 40 and 68 temporary employees to classified full time employees.</p> <p>Staff needed - FY19</p> <table border="1"> <thead> <tr> <th>Personnel</th> <th># Positions</th> <th>Rate</th> <th>Salary Costs</th> <th>Fringe = 42.18%</th> <th>Annually</th> <th></th> </tr> </thead> <tbody> <tr> <td>Supervisor</td> <td>1</td> <td>\$38,478</td> <td>\$38,478</td> <td>\$16,230.02</td> <td>\$54,708.02</td> <td></td> </tr> <tr> <td>Lead</td> <td>1</td> <td>\$32,784</td> <td>\$32,784</td> <td>\$13,828.29</td> <td>\$46,612.29</td> <td></td> </tr> <tr> <td>CSR</td> <td>7</td> <td>\$26,116</td> <td>\$182,812</td> <td>\$77,110.10</td> <td>\$259,922.10</td> <td></td> </tr> <tr> <td>Total FTE's</td> <td>9</td> <td></td> <td>\$254,074.00</td> <td>\$107,168.41</td> <td>\$361,242.41</td> <td>^ Recurring</td> </tr> </tbody> </table> <p>Recurring Costs</p> <table border="1"> <tbody> <tr> <td>Phones Leased Equip & Service</td> <td>9</td> <td>\$35.00</td> <td>Mon/Person</td> <td>\$3,780.00</td> <td>Annually</td> <td></td> </tr> <tr> <td>Data Lines & Data Storage</td> <td>1</td> <td>\$65.00</td> <td>Month/Dept</td> <td>\$780.00</td> <td>Annually</td> <td></td> </tr> <tr> <td>Office Supplies</td> <td>9</td> <td>\$1,000</td> <td>Annually/Person</td> <td>\$9,000.00</td> <td>Annually</td> <td></td> </tr> <tr> <td>Copier Expense</td> <td>9</td> <td>\$30.00</td> <td>Mon/Person</td> <td>\$3,240.00</td> <td>Annually</td> <td></td> </tr> <tr> <td>Cell Phones</td> <td>2</td> <td>\$45.00</td> <td>Month/Dept</td> <td>\$1,080.00</td> <td>Annually</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>\$17,880.00</td> <td>^ Recurring</td> <td></td> </tr> </tbody> </table> <table border="1"> <tr> <td colspan="5" style="text-align: right;">Total Estimated Recurring ^</td> <td>\$379,122.41</td> <td></td> </tr> </table>							Personnel	# Positions	Rate	Salary Costs	Fringe = 42.18%	Annually		Supervisor	1	\$38,478	\$38,478	\$16,230.02	\$54,708.02		Lead	1	\$32,784	\$32,784	\$13,828.29	\$46,612.29		CSR	7	\$26,116	\$182,812	\$77,110.10	\$259,922.10		Total FTE's	9		\$254,074.00	\$107,168.41	\$361,242.41	^ Recurring	Phones Leased Equip & Service	9	\$35.00	Mon/Person	\$3,780.00	Annually		Data Lines & Data Storage	1	\$65.00	Month/Dept	\$780.00	Annually		Office Supplies	9	\$1,000	Annually/Person	\$9,000.00	Annually		Copier Expense	9	\$30.00	Mon/Person	\$3,240.00	Annually		Cell Phones	2	\$45.00	Month/Dept	\$1,080.00	Annually						\$17,880.00	^ Recurring		Total Estimated Recurring ^					\$379,122.41	
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In summary, Real ID annual recurring costs total \$379,122

If these funds are not received, DMV will be unable to comply with all requirements of REAL ID.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

AGENCY NAME:	South Carolina Department of Motor Vehicles		
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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	3rd Priority
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Exchange Earmarked Authority for General Funds
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$2,500,000 Federal: Other: (\$2,500,000) Total: \$0
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What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	None
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:	
	<input type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input checked="" type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority # _____	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input checked="" type="checkbox"/>	Government and Citizens	

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

ACCOUNTABILITY OF FUNDS	<p>If DMV does not receive this funding, we will be unable to cover 100% of our FY19 expenditures.</p>
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What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	<p>DMV and vendors</p>
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	<p>When DMV was a non-appropriated agency, unspent cash was carried forward each year to begin the next fiscal year as DMV did not receive appropriated dollars. DMV is now an Appropriated Agency and no longer retains any operating revenue (with the exception of Plate Replacement). Since DMV will use remaining earmarked cash for Real ID and the Phoenix Migration pilot per Provisos, we must receive \$2,500,000 in General Fund cash/appropriations in order to cover operating expenses. Therefore, DMV requests \$2.5M in General Funds to replace \$2.5M in Earmarked Authority lost in the transition from a non-appropriated agency to an appropriated agency.</p>
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Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	4-Form#13491
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Plate Replacement <u>AUTHORITY ONLY</u>
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Provide a brief, descriptive title for this request.

AMOUNT	General: Federal: Other: \$1,300,000 Total: \$1,300,000
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What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	None
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:	
	<input type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input checked="" type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority # _____	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input checked="" type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

ACCOUNTABILITY OF FUNDS	<p>Plate Replacement (vehicle license plates) will be moved to a revolving replacement schedule and to do so will result in an increased need for earmarked authority.</p> <p>This request supports DMV’s objective 2.1.2 to improve accountability of Titles and Vehicle Registration through both technological advances and strict internal controls and Strategy 2.2, establishing cyclic events to coincide with the Department’s missions.</p>
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What specific agency objective, as outlined in the agency’s accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	3M and other vendors
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	<p>The replacement of the Sunrise plate begins July 2018. With this being DMV’s largest plate class, additional Earmarked Authority is requested to facilitate the replacement.</p> <p>Authority ONLY is requested because plate replacement is funded by the \$2 per registration currently retained by the plate replacement fund specifically for that purpose.</p> <p>If DMV does not receive the increase in Earmarked Authority for Plate Replacement, the agency will have to appear before the Other Funds Committee to request additional earmarked authority in order to cover costs associated with Plate Replacement in FY19. DMV is requesting an increase of \$1.3M (from \$4.9M to \$6.2M).</p>
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Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	5-Form#13492
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Moped Bill - Recurring
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$428,000 Federal: Other: Total: \$428,000
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What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	2 FTEs
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark “X” for all that apply:	
	<input type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input checked="" type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
	Related to a Non-Recurring request – If so, Priority # _____	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark “X” for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input checked="" type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
	<input checked="" type="checkbox"/>	Government and Citizens

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

ACCOUNTABILITY OF FUNDS	<p>Goal 2 Government and Citizens Plan, program and forecast strategic initiatives necessary to adapt to technological advances in industry and to provide the Agency the resources to perform its mission and core functions.</p> <p>Strategy 2.1 Set goals, determine actions and mobilize resources necessary to perform the Agency's mission and core functions.</p> <p>Objective 2.1.1 Provide secure and valid credentials to South Carolina citizens in an expeditious manner.</p> <p>This request enables DMV to be in compliance with the provisions of the Moped Bill.</p>
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What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	Vendors and DMV Employees
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	<p>This bill requires a moped operated on a public road or highway to be registered and the operator to be licensed with DMV in the same manner as passenger vehicles. The amended bill also expands the definition of motor vehicle to include mopeds for the purpose of uninsured and underinsured motorist insurance coverage.</p> <p>Our recurring request for FY2019 forward is \$428,000. The \$428,000 includes 2 FTEs' personnel costs, employer benefits, and recurring materials costs.</p> <p>Implementing and maintaining South Carolina's new Moped Bill costs associated with this bill will total \$545,480. Of this amount, \$117,480 for IT expenses, system testing, and the design and production of a template is non-recurring and is expected to occur in FY 2018-19.</p> <p>Recurring expenses for two additional employees and registration materials is estimated to be \$428,000, beginning in FY 2018-19.</p> <p>This estimate assumes all moped operator licenses renew in FY 2019-20.</p> <p>2 FTE's are needed to administer the Moped Bill. Existing vacancies are insufficient due to the conversion of between 40 and 68 temporary employees to full time employees and this is a new initiative requiring two FTE's to administer provisions of the bill.</p>
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Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:		SECTION:	

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	7-Form#13494
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Roads Bill - Recurring
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$220,500 Federal: Other: Total: \$220,500
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What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	4 FTEs
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:	
	<input type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input checked="" type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input checked="" type="checkbox"/>	Related to a Non-Recurring request – If so, Priority # <u>6</u>	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input checked="" type="checkbox"/>	Public Infrastructure and Economic Development
<input checked="" type="checkbox"/>	Government and Citizens	

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:		SECTION:	

ACCOUNTABILITY OF FUNDS	<p>Goal 2 Government and Citizens Plan, program and forecast strategic initiatives necessary to adapt to technological advances in industry and to provide the Agency the resources to perform its mission and core functions.</p> <p>Strategy 2.1 Set goals, determine actions and mobilize resources necessary to perform the Agency's mission and core functions.</p> <p>Objective 2.1.1 Provide secure and valid credentials to South Carolina citizens in an expeditious manner.</p>
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What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	DMV employees and vendors
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	<p>Recurring expenditures for administering the program, producing forms and materials, processing fee submissions, and handling disputes are expected, but projected expenditures for conducting these functions are currently undetermined. The agency expects to hire four FTEs to administer the program with estimated personnel expenditures of \$220,500 per year including fringe benefits. 1 FTE is required to account for the revenue collection and distribution of the Roads Bill Fees. 3 additional FTEs are required for the administration of the Roads Bill fees due to the transfer of these duties from Department of Revenue to DMV as calculated below.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="background-color: #d9e1f2; text-align: center;">4 FTE</td> <td style="background-color: #d9e1f2; text-align: center;">\$220,500</td> <td style="background-color: #d9e1f2; text-align: center;">Per-annum FTE requirement to support property tax processing. (\$157,500 + fringe = \$220,500)</td> </tr> </table> <p>No matching funds are available</p> <p>Existing vacancies are insufficient due to the addition of the conversion of between 40 and 68 temporary employees to full time employees. This request does have associated non-recurring request.</p>	4 FTE	\$220,500	Per-annum FTE requirement to support property tax processing. (\$157,500 + fringe = \$220,500)
4 FTE	\$220,500	Per-annum FTE requirement to support property tax processing. (\$157,500 + fringe = \$220,500)		

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	1-Form#13488 <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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TITLE	Real ID – Non-Recurring <i>Provide a brief, descriptive title for this request.</i>
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AMOUNT	\$5,637,990 <i>What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
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FACTORS ASSOCIATED WITH THE REQUEST	Mark “X” for all that apply:
	<input type="checkbox"/> Change in cost of providing current services to existing program audience
	<input type="checkbox"/> Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/> Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/> Non-mandated program change in service levels or areas
	<input type="checkbox"/> Proposed establishment of a new program or initiative
	<input type="checkbox"/> Loss of federal or other external financial support for existing program
	<input checked="" type="checkbox"/> Exhaustion of fund balances previously used to support program
	<input type="checkbox"/> IT Technology/Security related
	<input type="checkbox"/> Consulted DTO during development
	<input checked="" type="checkbox"/> Request for Non-Recurring Appropriations
<input type="checkbox"/> Request for Federal/Other Authorization to spend existing funding	
<input checked="" type="checkbox"/> Related to a Recurring request – If so, Priority # <u>2nd</u>	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark “X” for primary applicable Statewide Enterprise Strategic Objective:
	<input type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input checked="" type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input type="checkbox"/> Public Infrastructure and Economic Development
<input checked="" type="checkbox"/> Government and Citizens	

ACCOUNTABILITY OF FUNDS	In order to be in compliance with all provisions of REAL ID and all provisions after REAL ID, DMV needs the following non-recurring funding.
	The REAL ID request advances information security and accessibility and the project will use external auditing as a means to ensure compliance with state and federal laws and regulations (SCDMV Objective 6.1.6).
	Successful evaluation would be determined once all systems required for REAL ID are fully operational.
<i>What specific agency objective, as outlined in the agency’s accountability report, does this funding request support? How would this request advance that objective? How</i>	

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	AAMVA, contractors and vendors
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	<p>This is year two of REAL ID Implementation. REAL ID budget - Year 2 is \$5,089,920.</p> <table border="0"> <tr> <td>100 Customer Service Representatives (CSRs) Salaries & Employer Benefits</td> <td style="text-align: right;">\$3,173,403</td> </tr> <tr> <td>Increased Salaries and Benefits for 33 Relief CSRs(work where needed)</td> <td style="text-align: right;">\$101,574</td> </tr> <tr> <td>Mileage for daily commute for Relief CSR's</td> <td style="text-align: right;">\$261,647</td> </tr> <tr> <td>Contact Center 6 Extra Personnel and Benefits</td> <td style="text-align: right;">\$204,994</td> </tr> <tr> <td>1 FTE with Benefits in Imaging</td> <td style="text-align: right;">\$36,495</td> </tr> <tr> <td>2 Additional IT Help Desk FTEs</td> <td style="text-align: right;">\$100,388</td> </tr> <tr> <td>1 Temporary Employee in Imaging</td> <td style="text-align: right;">\$29,700</td> </tr> <tr> <td colspan="2">Saturday Work:</td> </tr> <tr> <td>Annual Bonus for 6 Branch Office Managers</td> <td style="text-align: right;">\$37,362</td> </tr> <tr> <td>20 CSRs at each site</td> <td style="text-align: right;">\$1,107,875</td> </tr> <tr> <td>8 hrs/week Overtime for IT Help Desk Personnel with Benefits</td> <td style="text-align: right;">\$14,277</td> </tr> <tr> <td>16 hrs/week Overtime for Data Quality Help Desk with Benefits</td> <td style="text-align: right;">\$22,205</td> </tr> <tr> <td style="text-align: right;">Total</td> <td style="text-align: right;">\$5,089,920</td> </tr> </table> <p>Last year's REAL ID was funded with Capital Reserve monies. Although this is a request for General Fund dollars, the funding stream decision will be determined by legislation and the Appropriation Act.</p> <p>Year 3 FY2019 – FY2020, is the final year of REAL ID implementation and will also require a one-time request.</p> <p>The following requirements, not included in the original REAL ID budget, have been identified.</p> <p>The State to State (S2S) Verification Service is required to ensure that a person is only issued one ID or driver's license (DL). S2S electronically checks all other participating states to determine if the applicant currently holds a driver's license or identification card in another state. The platform that supports S2S is the State Pointer Exchange System (SPEXS).</p> <p>The State Pointer Exchange System (SPEXS) electronically transfers any pointers against the person's DL from other states. The SPEXS platform is necessary for implementation of the REAL ID requirement STATE to STATE (S2S). SPEXS requires one-time IT costs of \$150,000 for implementation.</p>	100 Customer Service Representatives (CSRs) Salaries & Employer Benefits	\$3,173,403	Increased Salaries and Benefits for 33 Relief CSRs(work where needed)	\$101,574	Mileage for daily commute for Relief CSR's	\$261,647	Contact Center 6 Extra Personnel and Benefits	\$204,994	1 FTE with Benefits in Imaging	\$36,495	2 Additional IT Help Desk FTEs	\$100,388	1 Temporary Employee in Imaging	\$29,700	Saturday Work:		Annual Bonus for 6 Branch Office Managers	\$37,362	20 CSRs at each site	\$1,107,875	8 hrs/week Overtime for IT Help Desk Personnel with Benefits	\$14,277	16 hrs/week Overtime for Data Quality Help Desk with Benefits	\$22,205	Total	\$5,089,920
100 Customer Service Representatives (CSRs) Salaries & Employer Benefits	\$3,173,403																										
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Total	\$5,089,920																										

The STATE to STATE (S2S) program requires another one-time implementation cost of **\$362,520** as approved by DTO. Because the S2S system has become a requirement for Real ID by AAMVA and will require significant programming and testing to implement, SCDMV is requesting the implementation costs outlined below.

Analysis & Design	500 hrs*\$90/hr	\$45,000.00
Application Development	2328 hrs*\$90/hr	\$209,520.00
Testing	800 hrs*\$90/hr	\$72,000.00
Implementation & Other	400 hrs*\$90/hr	\$36,000.00
*Requested programing and testing costs for State to State		\$362,520.00

Additional one-time equipment costs for the S2S help desk are as follows:

Equipment		Total	
Computers	9	\$3,600	\$32,400
Monitors	9	\$350	\$3,150
		*Non-Recurring Equipment	\$35,550

Thus year 2 implementation and setup costs requested for REAL ID are \$5,637,990.

If these funds are not received, DMV will be unable to continue implementation of REAL ID.

These requirements create a recurring request for State to State Help Desk personnel, operating costs, and supplies.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. Does this non-recurring appropriation request create an annualization or need for recurring funds?

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	6-Form#13493
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Roads Bill – Non-Recurring
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Provide a brief, descriptive title for this request.

AMOUNT	\$330,800
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What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:
	<input type="checkbox"/> Change in cost of providing current services to existing program audience
	<input type="checkbox"/> Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/> Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/> Non-mandated program change in service levels or areas
	<input checked="" type="checkbox"/> Proposed establishment of a new program or initiative
	<input type="checkbox"/> Loss of federal or other external financial support for existing program
	<input type="checkbox"/> Exhaustion of fund balances previously used to support program
	<input type="checkbox"/> IT Technology/Security related
	<input type="checkbox"/> Consulted DTO during development
	<input checked="" type="checkbox"/> Request for Non-Recurring Appropriations
	<input type="checkbox"/> Request for Federal/Other Authorization to spend existing funding
<input checked="" type="checkbox"/> Related to a Recurring request – If so, Priority # ___7th_____	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:
	<input type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input checked="" type="checkbox"/> Public Infrastructure and Economic Development
<input checked="" type="checkbox"/> Government and Citizens	

ACCOUNTABILITY OF FUNDS	<p>Goal 2 Government and Citizens - Plan, program and forecast strategic initiatives necessary to adapt to technological advances in industry and to provide the Agency the resources to perform its mission and core functions.</p> <p>Strategy 2.1 Set goals, determine actions and mobilize resources necessary to perform the Agency's mission and core functions.</p> <p>Objective 2.1.1 Provide secure and valid credentials to South Carolina citizens in an expeditious manner.</p>
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What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

RECIPIENTS OF FUNDS	Celtic – vendor/designer of DMV’s applicable software or similar vendor via RFP solicitation
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	<p>DMV will have significant programming and software modification to complete in 2019 as a result of the transfer of certain duties from the Department of Revenue to Motor Carrier Administration at DMV.</p> <p>Estimated costs are based on discussions with the software vendor regarding the modifications necessary.</p>				
	Explanation	Vendor/Product	Hours	Amount	Work to Be Completed
	<p>Interstate Motor Carriers: Interstate large commercial vehicles are the IRP registered vehicles managed by the SCDMV Motor Carrier System (MCS). MCS is a 3rd party system managed and supported by Celtic Information Services. These carriers operate through out the US and are charged fees based on the fraction of miles that they operate in South Carolina.</p>	Celtic Development		\$40,000	Modify the Celtic MCS system to add the Road Use / Property Tax calculations. This will involve database changes, calculation changes, user interface updates and interface updates to Phoenix for payment collection.
<p>Intrastate Motor Carriers: Intrastate large commercial vehicles are operated only within SC. These vehicles are managed through the SCDMV Phoenix II system.</p>	<p>Technical Specifications</p> <p>County Interface</p>	<p>40</p> <p>100</p>	<p>\$8,800</p> <p>\$11,000</p>	<p>Phoenix sends a fee calculation request to MCS to have the road use fee calculated for Intrastate large commercial vehicles leveraging the modifications to Motor Carrier System implemented for Interstate carriers described above. This fee will be presented to the endpoint (Phoenix Point of Sale, County, or Web) for collection.</p> <p>Modify the renewal messages presented to the counties for collection by the county. NOTE: must be implemented 90 days prior to the fee collection beginning January 2018.</p>	

Explanation	Vendor/Product	Hours	Amount	Work to Be Completed
DMV estimates this amount of time is needed from the business areas to fully define the business rules and requirements to implement this section of legislation across both business segments. The product(s) of this effort will direct the technical implementation for the entire legislation requirement across both business segments. It will also define the business transition from DOR to DMV, and the business processes, and procedures needed.	Quarterly Online Payment			Modify the Phoenix web registration renewal transaction to allow a quarterly payment if the customer qualifies. Modify Phoenix to track quarterly payments, create renewal announcements, and impose suspensions and other operational or fiscal restrictions if payments not received. Add a 2nd transaction to allow subsequent quarterly payments after initial registration.
	Technical Specifications	40	\$8,800	
	Development	2,000	\$150,000	
	Total Intrastate:		\$218,600	
Common: These expense are common to both interstate and intrastate motor carrier support.	Business Specifications	960	\$105,600	Updates to Phoenix for collecting the fees and disbursing the amounts as required by legislation.
	Disbursement Updates	60	\$6,600	
	Total Common		\$112,200	
	Total Requested		\$330,800	

No other funding stream has been identified and no matching funds are available.

This non-recurring request does create an annualizations of recurring costs for personnel and operating expenses.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. Does this non-recurring appropriation request create an annualization or need for recurring funds?

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	8-Form#13495
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	TERI Payouts
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Provide a brief, descriptive title for this request.

AMOUNT	\$412,450
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What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:
	<input type="checkbox"/> Change in cost of providing current services to existing program audience
	<input type="checkbox"/> Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/> Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/> Non-mandated program change in service levels or areas
	<input type="checkbox"/> Proposed establishment of a new program or initiative
	<input type="checkbox"/> Loss of federal or other external financial support for existing program
	<input type="checkbox"/> Exhaustion of fund balances previously used to support program
	<input type="checkbox"/> IT Technology/Security related
	<input type="checkbox"/> Consulted DTO during development
	<input checked="" type="checkbox"/> Request for Non-Recurring Appropriations
	<input type="checkbox"/> Request for Federal/Other Authorization to spend existing funding
<input type="checkbox"/> Related to a Recurring request – If so, Priority # _____	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:
	<input checked="" type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input type="checkbox"/> Public Infrastructure and Economic Development
<input type="checkbox"/> Government and Citizens	

ACCOUNTABILITY OF FUNDS	<p>This request supports the agency's human development strategy 4.1.1 by assessing and reassessing Agency short and long term goals with managers and supervisors during weekly, monthly and quarterly staff meetings as a means to provide situational awareness and adapt to changing needs of the Agency.</p>
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What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

RECIPIENTS OF FUNDS	DMV Employees/SC Citizens
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	The Annual Leave Payouts for TERI employees required to retire at 6/30/18 is calculated below. The calculation assumes current balances above 30 days will be calculated using 45 days at retirement and those below 30 days will be calculated using 35 days.						
	Program	Employee Group Text	Hours per Week	Current Salaries	Leave Days To Be Paid Out	Payout Calculation	Totals by Program
	Administration - Support Services	CLASSIFIED FTE	37.5	\$44,351.00	45	\$7,676.10	
		CLASSIFIED FTE	37.5	\$25,957.00	45	\$4,492.35	
	Administration - Support Services Total			\$70,308.00		\$12,168.45	\$12,168
	Procedures & Compliance	UNCLASSIFIED FTE	37.5	\$102,309.00	45	\$17,707.50	\$17,708
		CLASSIFIED FTE	37.5	\$88,717.00	45	\$15,354.90	
		CLASSIFIED FTE	37.5	\$26,770.00	45	\$4,633.20	\$19,988
	Procedures & Compliance Total			\$217,796.00		\$37,695.60	\$37,696
	Customer Service Centers	CLASSIFIED FTE	37.5	\$64,221.00	45	\$11,115.00	
		CLASSIFIED FTE	40	\$50,088.00	45	\$8,669.25	
		CLASSIFIED FTE	40	\$33,405.00	45	\$5,781.60	
		CLASSIFIED FTE	40	\$30,407.00	45	\$5,262.75	
		CLASSIFIED FTE	40	\$47,476.00	45	\$8,220.60	
		CLASSIFIED FTE	40	\$50,088.00	45	\$8,669.25	
		CLASSIFIED FTE	40	\$50,088.00	45	\$8,669.25	
		CLASSIFIED FTE	40	\$27,301.00	45	\$4,725.00	
		CLASSIFIED FTE	40	\$53,689.00	45	\$9,292.50	
		CLASSIFIED FTE	40	\$29,447.00	45	\$5,096.70	
		CLASSIFIED FTE	40	\$34,086.00	35	\$4,588.50	
		CLASSIFIED FTE	40	\$29,571.00	45	\$5,117.85	
		CLASSIFIED FTE	40	\$27,286.00	45	\$4,722.75	
		CLASSIFIED FTE	40	\$37,276.00	45	\$6,451.65	
		CLASSIFIED FTE	40	\$37,592.00	45	\$6,506.10	
		CLASSIFIED FTE	40	\$29,804.00	45	\$5,158.35	
CLASSIFIED FTE		40	\$36,275.00	45	\$6,277.95		
CLASSIFIED FTE		40	\$27,025.00	45	\$4,677.30		
CLASSIFIED FTE	40	\$39,737.00	45	\$6,877.35			
CLASSIFIED FTE	40	\$19,877.00	45	\$3,440.25			

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

	CLASSIFIED FTE	40	\$34,645.00	45	\$5,996.25	
	CLASSIFIED FTE	40	\$53,689.00	45	\$9,292.50	
	CLASSIFIED FTE	40	\$53,689.00	45	\$9,292.50	
	CLASSIFIED FTE	40	\$31,023.00	45	\$5,369.40	
Customer Service Centers Total			\$927,785.00		\$159,270.60	\$159,271
Customer Service Delivery	CLASSIFIED FTE	37.5	\$73,527.00	45	\$12,726.00	
	CLASSIFIED FTE	37.5	\$82,145.00	45	\$14,217.30	
	CLASSIFIED FTE	37.5	\$36,782.00	45	\$6,366.15	
	CLASSIFIED FTE	37.5	\$42,990.00	45	\$7,440.75	
Customer Service Delivery Total			\$235,444.00		\$40,750.20	\$40,750
Office of Inspector General	CLASSIFIED FTE	37.5	\$45,205.00	45	\$7,824.15	
	CLASSIFIED FTE	37.5	\$45,514.00	45	\$7,877.25	
	CLASSIFIED FTE	37.5	\$38,575.00	45	\$6,676.65	
Office of Inspector General Total			\$129,294.00		\$22,378.05	\$22,378
Technology & Product Development	CLASSIFIED FTE	37.5	\$54,763.00	45	\$9,478.35	
	CLASSIFIED FTE	37.5	\$48,252.00	45	\$8,351.10	
Technology & Product Development Total			\$103,015.00		\$17,829.45	\$17,829
Grand Total			\$1,683,642.00		\$290,092.35	\$290,092

Employer Benefits Rate	42.18%	FY19 Total Payout with Employer Benefits
	\$122,361	\$412,450

No recurring funds are needed.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. Does this non-recurring appropriation request create an annualization or need for recurring funds?

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R400	SECTION:	

FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	10th Priority <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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TITLE	Business Continuity Plan <i>Provide a brief, descriptive title for this request.</i>
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AMOUNT	\$170,000 <i>What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
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FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:
	<input type="checkbox"/> Change in cost of providing current services to existing program audience
	<input type="checkbox"/> Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/> Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/> Non-mandated program change in service levels or areas
	<input checked="" type="checkbox"/> Proposed establishment of a new program or initiative
	<input type="checkbox"/> Loss of federal or other external financial support for existing program
	<input type="checkbox"/> Exhaustion of fund balances previously used to support program
	<input checked="" type="checkbox"/> IT Technology/Security related
	<input checked="" type="checkbox"/> Consulted DTO during development
	<input checked="" type="checkbox"/> Request for Non-Recurring Appropriations
<input type="checkbox"/> Request for Federal/Other Authorization to spend existing funding	
<input type="checkbox"/> Related to a Recurring request – If so, Priority # _____	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:
	<input type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input checked="" type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input type="checkbox"/> Public Infrastructure and Economic Development
<input type="checkbox"/> Government and Citizens	

ACCOUNTABILITY OF FUNDS	<p>3.1 Develop or acquire alternative methods for product and services security and delivery and pursue legislative support, as necessary, to ensure successful implementation.</p> <p>These funds would ensure critical business processes and their impact are analyzed and prioritized to ensure uninterrupted support to the citizens of SC.</p> <p>The successful delivery of a detailed Business Continuity Plan to the Department is the principal evaluation methodology.</p>
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What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

AGENCY NAME:	South Carolina Department of Motor Vehicles	
AGENCY CODE:	R400	SECTION:

RECIPIENTS OF FUNDS	Vendor selected through a competitive process or state contract based on criteria established and communicated through an RFP process.
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	<p>DMV’s responsibilities are unique because of the sensitivity and nature of the data and the core mission functions of titling, registering vehicles, monitoring automobile dealers and administering the Driver Services such as licensing. Relevant stakeholders would be negatively impacted if we do not develop an executable business continuity plan in the case of a catastrophic event.</p> <p>DMV relies completely on our Phoenix System and IT infrastructure. In accordance with the Governor’s Statewide IT Strategic Plan, we are attempting to expand our ability to recover in the event of some form of disaster directly impacting our IT systems. While we have the ability to recover data, we do not currently possess nor have the resident expertise to develop a comprehensive business continuity plan with associated Business Impact Analysis.</p> <p>All state cabinet agencies have a requirement to prepare a Business Continuity (BC) plan. The Material Management Office and Department Of Administration (DOA) have worked with one agency to secure preparation of a business continuity plan; the Judicial Department, therefore DMV used this agency for comparison. Similarities can be drawn between DMV and the Judicial Department as both agencies have offices across the state and both protect sensitive data.</p> <p>There are no matching or offset funds and these funds are different than what we’ve requested for Disaster Recovery (duplication of data) implementation.</p> <p>Although no recurring funds are requested for 2019, this request could generate a need for recurring funds if we contract for an outside vendor to maintain a Business Continuity and Disaster Recovery capability over a number of years. Our intent though, is to utilize DOAs disaster recovery capability in the implementation of our business continuity plan.</p>
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Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. Does this non-recurring appropriation request create an annualization or need for recurring funds?

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

FORM C – CAPITAL REQUEST

AGENCY PRIORITY	9-Form#13496
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Statewide HVAC Upgrade Project
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Provide a brief, descriptive title for this request.

AMOUNT	\$200,000
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How much is requested for this project in FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.

CPIP PRIORITY	<p>Priority 3 out of 8 for FY19 If DMV does not receive this funding, DMV would be forced to upgrade on an emergency basis as all other capital improvements are already committed to deferred maintenance or renovation and paving projects.</p>
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Identify the project's CPIP plan year and priority number, along with the first year in which the project was included in the agency's CPIP. If not included in the agency's CPIP, please provide an explanation. If the project involves a request for appropriated state funding, briefly describe the agency's contingency plan in the event that state funding is not made available in the amount requested.

OTHER APPROVALS	<p>If approved during this process, we would subsequently need JBRC approval.</p>
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What approvals have already been obtained? Are there additional approvals that must be secured in order for the project to succeed? (Institutional board, JBRC, SFAA, etc.)

LONG-TERM PLANNING AND SUSTAINABILITY	<p>Other capital projects such as deferred maintenance, have been used on an emergency basis to replace HVAC units in the past. Those funds are now committed to other deferred maintenance projects.</p> <p>DMV anticipates another non-recurring capital request in the amount of \$120,000 for the 2020 budget year for the remainder of those HVAC units beyond their useful life.</p> <p>No other sources of funding have been identified. And no additional annual costs or savings have been identified.</p>
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What other funds have already been invested in this project (source/type, amount, timeframe)? Will other capital and/or operating funds for this project be requested in the future? If so, how much, and in which fiscal years? Has a source for those funds been identified/secured? What is the agency's expectation with regard to additional annual costs or savings associated with this capital improvement? What source of funds will be impacted by those costs or savings? What is the expected useful life of the capital

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improvement?

SUMMARY	<p>DMV has determined those HVAC systems beyond their useful life and those units that would be difficult to procure on short notice number 42 out of 67 branch offices.</p> <p>The average cost of a HVAC is \$7,500 and is based on the average cost of HVAC units replaced in the past and adjusted for inflation. The useful life of a HVAC averages to 15 years. Based on our current and planned capital projects for 2018, we will use these funds in 2019, and complete our replacement of the identified HVAC units in 2020.</p>
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Provide a summary of the project and explain why it is necessary. Please refer to the budget guidelines for appropriate questions and thoroughly answer all related items.

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FORM D – PROVISO REVISION REQUEST

NUMBER 82.5

Cite the proviso according to the renumbered list for FY 2018-19 (or mark "NEW").

TITLE Five-Year Eye Exam Suspension

Provide the title from the FY 2017-18 Appropriations Act or suggest a short title for any new request.

BUDGET PROGRAM Customer Service Centers 1000.102000.000

Identify the associated budget program(s) by name and budget section.

RELATED BUDGET REQUEST No

Is this request associated with a budget request you have submitted for FY 2018-19? If so, cite it here.

REQUESTED ACTION Delete

Choose from: Add, Delete, Amend, or Codify.

OTHER AGENCIES AFFECTED None

Which other agencies would be affected by the recommended action? How?

SUMMARY & EXPLANATION

Eye Exam: The existing proviso suspended the five-year eye exam requirement in South Carolina. See legislation H.3358.

Summarize the existing proviso. If requesting a new proviso, describe the current state of affairs without it. Explain the need for your requested action. For deletion requests due to recent codification, please identify SC Code section where language now appears.

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FISCAL IMPACT	<p>No fiscal impacts have been prepared regarding the changes to provisos requested.</p>
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Provide estimates of any fiscal impacts associated with this proviso, whether for state, federal, or other funds. Explain the method of calculation.

PROPOSED PROVISO TEXT	<p>Five Year Eye Exam Suspension Proviso 82.5: No eye exam is required after the initial exam to obtain a driver license due to REAL ID, therefore the renumbered proviso 82.5 should be deleted.</p> <p>New Language: (Numbered 82.7 in FY18) 82.7. (DMV: Five Year Eye Exam Suspension) For the current fiscal year, Section 56-1-220(B), relating to the requirement for a vision screening certificate during the fifth year of a ten-year driver's license, is suspended.</p>
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Paste FY 2017-18 text above, then bold and underline insertions and strikethrough deletions. For new proviso requests, enter requested text above.

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AGENCY CODE:	R40	SECTION:	82

FORM D – PROVISO REVISION REQUEST

NUMBER	82.8
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Cite the proviso according to the renumbered list for FY 2018-19 (or mark "NEW").

TITLE	Phoenix III Migration
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Provide the title from the FY 2017-18 Appropriations Act or suggest a short title for any new request.

BUDGET PROGRAM	IT 1001.400000.000
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Identify the associated budget program(s) by name and budget section.

RELATED BUDGET REQUEST	No
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Is this request associated with a budget request you have submitted for FY 2018-19? If so, cite it here.

REQUESTED ACTION	Amend
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Choose from: Add, Delete, Amend, or Codify.

OTHER AGENCIES AFFECTED	None
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Which other agencies would be affected by the recommended action? How?

SUMMARY & EXPLANATION	<p>Phoenix III Migration: The existing proviso allows DMV to spend \$1,000,000 in Fiscal year 2017-2018.</p> <p>The requested revision seeks approval to reword the proviso to allow DMV to spend the remainder of the funds on Phoenix III in FY19.</p>
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Summarize the existing proviso. If requesting a new proviso, describe the current state of affairs without it. Explain the need for your requested action. For deletion requests due to recent codification, please identify SC Code section where language now appears.

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

FISCAL IMPACT	<p>No fiscal impacts have been prepared regarding the changes to provisos requested.</p>
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Provide estimates of any fiscal impacts associated with this proviso, whether for state, federal, or other funds. Explain the method of calculation.

PROPOSED PROVISO TEXT	<p>Phoenix III Migration Pilot: The requested revision seeks to reword the proviso to read as follows:</p> <p>82.8. (DMV: Phoenix III Migration Pilot) In Fiscal Year 2017-18 2018-19, the department shall be authorized to expend up to the remainder of the \$1,000,000 authorized in the prior fiscal year from any available other earmarked cash balances to conduct a proof-of-concept pilot for Phoenix III development and data migration. Funds may be expended only upon review and approval of the Department of Administration through the IT project governance process established by proviso 117.121.</p>
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Paste FY 2017-18 text above, then bold and underline insertions and strikethrough deletions. For new proviso requests, enter requested text above.

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FORM D – PROVISO REVISION REQUEST

NUMBER	82.9
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Cite the proviso according to the renumbered list for FY 2018-19 (or mark "NEW").

TITLE	REAL ID
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Provide the title from the FY 2017-18 Appropriations Act or suggest a short title for any new request.

BUDGET PROGRAM	All SCDMV Programs
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Identify the associated budget program(s) by name and budget section.

RELATED BUDGET REQUEST	Yes
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Is this request associated with a budget request you have submitted for FY 2018-19? If so, cite it here.

REQUESTED ACTION	Amend
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Choose from: Add, Delete, Amend, or Codify.

OTHER AGENCIES AFFECTED	None
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Which other agencies would be affected by the recommended action? How?

SUMMARY & EXPLANATION	<p>REAL ID: The current proviso allows DMV to expend any earmarked cash reserves above the \$1,000,000 for Phoenix III Migration on REAL ID in 2017-2018.</p> <p>The requested revision seeks approval to reword the proviso to allow DMV to spend the remainder of the earmarked cash reserves, if any, (above the \$1,000,000 designated for Phoenix III) on REAL ID in FY19.</p>
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Summarize the existing proviso. If requesting a new proviso, describe the current state of affairs without it. Explain the need for your requested action. For deletion requests due to recent codification, please identify SC Code section where language now appears.

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

FISCAL IMPACT	<p>No fiscal impacts have been prepared regarding the changes to provisos requested.</p>
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Provide estimates of any fiscal impacts associated with this proviso, whether for state, federal, or other funds. Explain the method of calculation.

PROPOSED PROVISO TEXT	<p>REAL ID: The requested revision seeks to reword the proviso to read as follows: 82.9. (DMV: Real ID) For Fiscal Year 2017-18 2018-19, the Department of Motor Vehicles may expend any available earmarked cash reserves, with the exception of the \$1,000,000 <u>funds</u> designated for the Phoenix III pilot, on the implementation of Real ID.</p>
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Paste FY 2017-18 text above, then bold and underline insertions and strikethrough deletions. For new proviso requests, enter requested text above.

AGENCY NAME:	South Carolina Department of Motor Vehicles		
AGENCY CODE:	R40	SECTION:	82

FORM E – AGENCY COST SAVINGS AND GENERAL FUND REDUCTION CONTINGENCY PLAN

TITLE	Agency Cost Savings and General Fund Reduction Contingency Plan
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AMOUNT	<p>\$2,571,757</p> <p><i>What is the General Fund 3% reduction amount (minimum based on the FY 2017-18 recurring appropriations)? This amount should correspond to the reduction spreadsheet prepared by EBO.</i></p>
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ASSOCIATED FTE REDUCTIONS	<p>None</p> <p><i>How many FTEs would be reduced in association with this General Fund reduction?</i></p>
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PROGRAM/ACTIVITY IMPACT	<p>Customer Service Centers, Vehicle Services, Administration, Driver Services, Customer Service Delivery, Office of Inspector General</p> <p><i>What programs or activities are supported by the General Funds identified?</i></p>
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SUMMARY	<p>If forced to take a 3% General Fund reduction, DMV would postpone equipment refresh in the amount of \$1,140,000. Although unsustainable for multiple years, this would prevent a significant impact on customer services in the current year.</p> <p>Secondly, DMV would eliminate temporary services at DMV Field Offices in the amount of \$1,432,000. This would have a negative impact on customer service by increasing wait times and possibly resulting in long lines at DMV Field Offices around the State.</p>
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Please provide a detailed summary of service delivery impact caused by a reduction in General Fund Appropriations and provide the method of calculation for anticipated reductions. Agencies should prioritize reduction in expenditures that have the least significant impact on service delivery.

AGENCY COST SAVINGS PLANS	<p>DMV has implemented the “single sticker program” on vehicle license plates, which eliminates the “month” stickers and costs associated with leftover inventory destroyed each year. This initiative will save the State/DMV approximately \$800,000 over a 10-year plate reissue cycle.</p> <p>The approximate \$80,000 annual savings realized from single sticker is leveraged to reduce or offset rising operating expenses. For instance, DMV had a \$65,000 increase on one software maintenance contract due to the additional document storage needed to satisfy REAL ID requirements.</p>
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What measures does the agency plan to implement to reduce its costs and operating expenses by more than \$50,000? Provide a summary of the measures taken and the estimated amount of savings. How does the agency plan to repurpose the savings?

AGENCY NAME:	South Carolina Department of Motor Vehicles		
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FORM F – REDUCING COST AND BURDEN TO BUSINESSES AND CITIZENS

TITLE	Legislative Accomplishments and Upcoming Priorities
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Provide a brief, descriptive title for this request.

EXPECTED SAVINGS TO BUSINESSES AND CITIZENS	Less burden on our business partners in terms of renewal obligations, more convenient DMV access for the public
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What is the expected savings to South Carolina’s businesses and citizens that is generated by this proposal? The savings could be related to time or money.

FACTORS ASSOCIATED WITH THE REQUEST	<p>Mark “X” for all that apply:</p> <table border="1"> <tr> <td><input checked="" type="checkbox"/></td> <td>Repeal or revision of regulations.</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Reduction of agency fees or fines to businesses or citizens.</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Greater efficiency in agency services or reduction in compliance burden.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other</td> </tr> </table>	<input checked="" type="checkbox"/>	Repeal or revision of regulations.	<input checked="" type="checkbox"/>	Reduction of agency fees or fines to businesses or citizens.	<input checked="" type="checkbox"/>	Greater efficiency in agency services or reduction in compliance burden.	<input type="checkbox"/>	Other
<input checked="" type="checkbox"/>	Repeal or revision of regulations.								
<input checked="" type="checkbox"/>	Reduction of agency fees or fines to businesses or citizens.								
<input checked="" type="checkbox"/>	Greater efficiency in agency services or reduction in compliance burden.								
<input type="checkbox"/>	Other								

METHOD OF CALCULATION	
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Describe the method of calculation for determining the expected cost or time savings to businesses or citizens.

REDUCTION OF FEES OR FINES	The fine reduction we’re pursuing this year is the elimination of the \$1 fee for the veteran’s designation on the ID cards. H.3358 (Real ID) deleted the \$1 fee for veteran’s designation on the driver’s license last year, but we later discovered the equivalent fee for the ID card was located in a different section of law.
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Which fees or fines does the agency intend to reduce? What was the fine or fee revenue for the previous fiscal year? What was the associated program expenditure for the previous fiscal year? What is the enabling authority for the issuance of the fee or fine?

REDUCTION OF REGULATION	The SCDMV intends to seek codification of all three of its regulations after reviewing all provisions within to make sure they reflect industry best practice and are friendly to consumers and business partners. For instance, instead of requiring renewal of third party testing certification annually on June 30, we are looking at requiring it every three years on a rolling basis. This helps businesses reduce paperwork and red tape while allowing the DMV to spread the workload out through less busy times of the year.
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Which regulations does the agency intend to amend or delete? What is the enabling authority for the regulation?

AGENCY NAME:	South Carolina Department of Motor Vehicles		
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SUMMARY

This year, we will be implementing online renewals for driver’s licenses. Since the issuance period of a driver’s license (for a Class D) is now eight years for everyone, and the maximum amount of time you’re allowed to hold the same license photo is 16 years, many members of the public will be eligible to renew their licenses online every other cycle. This will reduce lines at the DMV, allow South Carolinians to renew their licenses on the go, and allow the DMV to better serve customers who must complete transactions in person.

The DMV is also interested in supporting our law enforcement community by pursuing the issuance of temporary license plates that have an identification number linked to an individual driver. Currently, all you see on a temporary license plate is the date the plate expires and advertising from the dealership. This gives law enforcement no information as to who they may be approaching. Having a number on the plate linked to the purchaser will provide a greater level of security for our officers.

The DMV receives proof of insurance information electronically through a system called ALIR. Prior to the electronic submission, a form called “SR-22” was required to be filled out by an insurance company and submitted to the DMV for higher risk drivers to prove they were insured. This practice is outdated and unnecessary thanks to advances in technology (ALIR), and creates excess work for insurance companies and an additional cost (\$25 to the insurance company) for consumers. We would like to eliminate the practice of submitting “SR 22.”

When pursuing curbstoners (those who sell five or more cars per year without a dealer’s license) or dealers selling out of trust, the DMV refers cases to SLED as the DMV has no enforcement authority. Other states, such as North Carolina, have enforcement authority within the DMV to lessen the burden on law enforcement. The DMV would like authorization to pursue this efficiency, having in house enforcement authority and pursuing those who violate laws within our purview in a timely manner.

Provide an explanation of the proposal and its positive results on businesses or citizens. How will the request affect agency operations?