

Agency Name:	Department Of Agriculture		
Agency Code:	P160	Section:	44



**Fiscal Year FY 2021-2022
Agency Budget Plan**

FORM A - BUDGET PLAN SUMMARY

OPERATING REQUESTS <i>(FORM B1)</i>	For FY 2021-2022, my agency is (mark "X"):	
	<input checked="" type="checkbox"/>	Requesting General Fund Appropriations.
	<input type="checkbox"/>	Requesting Federal/Other Authorization.
	<input type="checkbox"/>	Not requesting any changes.

NON-RECURRING REQUESTS <i>(FORM B2)</i>	For FY 2021-2022, 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 <i>(FORM C)</i>	For FY 2021-2022, my agency is (mark "X"):	
	<input type="checkbox"/>	Requesting funding for Capital Projects.
	<input checked="" type="checkbox"/>	Not requesting any changes.

PROVISOS <i>(FORM D)</i>	For FY 2021-2022, my agency is (mark "X"):	
	<input type="checkbox"/>	Requesting a new proviso and/or substantive changes to existing provisos.
	<input type="checkbox"/>	Only requesting technical proviso changes (such as date references).
	<input checked="" type="checkbox"/>	Not requesting any proviso changes.

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

	<i>Name</i>	<i>Phone</i>	<i>Email</i>
PRIMARY CONTACT:	Aaron Wood	(803) 734-2182	aewood@scda.sc.gov
SECONDARY CONTACT:	Louis Anderson	(803) 734-2195	lhanderson@scda.sc.gov

I have reviewed and approved the enclosed FY 2021-2022 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

SIGN/DATE: TYPE/PRINT NAME:	<i>Agency Director</i>	<i>Board or Commission Chair</i>
	 Hugh E. Weathers	

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

Agency Name:	Department Of Agriculture
Agency Code:	P160
Section:	44

BUDGET REQUESTS			FUNDING					FTES				
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	B1 - Recurring	Operational Costs	850,000	0	0	0	850,000	0.00	0.00	0.00	0.00	0.00
2	B1 - Recurring	Consumer Protection Inspectors	0	0	0	0	0	8.00	0.00	-8.00	0.00	0.00
3	B1 - Recurring	Federal Hemp Farming Compliance	1,100,000	0	0	0	1,100,000	5.00	0.00	0.00	0.00	5.00
4	B2 - Non-Recurring	Hemp Testing Equipment	425,000	0	0	0	425,000	0.00	0.00	0.00	0.00	0.00
5	B1 - Recurring	Agricultural Marketing	500,000	0	0	0	500,000	0.00	0.00	0.00	0.00	0.00
6	B2 - Non-Recurring	Back-up Generator	300,000	0	0	0	300,000	0.00	0.00	0.00	0.00	0.00
7	B2 - Non-Recurring	Farmland Conservation Study	150,000	0	0	0	150,000	0.00	0.00	0.00	0.00	0.00
TOTALS			3,325,000	0	0	0	3,325,000	13.00	0.00	-8.00	0.00	5.00

Agency Name:	Department Of Agriculture		
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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	1
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Operational Costs
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$850,000 Federal: \$0 Other: \$0 Total: \$850,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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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 checked="" 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	

ACCOUNTABILITY OF FUNDS	1.1, 1.2, 1.3, 2.1, 2.2, 3.1, 3.2
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	These funds will be used to pay for goods and services procured according to state procurement rules. The Department of Administration is one of our primary service contractors. These funds would also be used to pay the salary of one existing
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FUNDS

employee, an Attorney III, hired in August 2018.

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

Over the last several years, South Carolina Department of Agriculture (SCDA) has been tasked with expanded regulatory responsibilities, for which direct appropriations have not been made. Some examples of these include the Hemp Farming Act, Manufactured Food Regulatory Program Standards (MFRPS), Animal Feed Regulatory Program Standards (AFRPS), and implementation of the Food Safety and Modernization Act (FSMA) rules. These programs, which improve consumer safety and producer market access, have added costs for personnel, equipment, workspace, vehicles, insurance, network services, and computing hardware and software. SCDA had to hire an in-house attorney to help navigate the ambiguous state and federal legal parameters. Not only has state law increased food and feed safety inspection activity, federal cooperative agreements require SCDA to have exit strategies of sustainment. This funding is to backfill these additional operating costs.

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.

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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	2
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Consumer Protection Inspectors
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$0 Other: \$0 Total: \$0
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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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 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	2.1, 2.2
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	Employees
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FUNDS

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

During gas tax reform, SCDA fuel inspection program (Consumer Services) funding was shifted from the 1/10 of 1 cent per gallon of fuel to a recurring general appropriation. With that funding change, inspectors took General Fund FTE slots, leaving Other FTE slots. Essentially, the funding was changed by the FTE slots were not transferred, so this transfer of positions is now being requested.

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.

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FORM B1 – RECURRING OPERATING REQUEST

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

TITLE	Federal Hemp Farming Compliance
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Provide a brief, descriptive title for this request.

AMOUNT	<p>General: \$1,100,000</p> <p>Federal: \$0</p> <p>Other: \$0</p> <p>Total: \$1,100,000</p>
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	5.00
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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 checked="" 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 # 4	

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

ACCOUNTABILITY OF FUNDS	2.1, 2.2, 3.2
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	Funds recipients would be the Department of Administration (Fleet, DTO, General Services), vendors (equipment and supplies), personnel, and other state and federal agencies.
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FUNDS

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

With the 31 October 2019 release of the USDA Industrial Hemp interim rule, there are now certain strict standards to which state agriculture departments must agree and follow (i.e.: mandatory testing, official sample collections, verification inspections, processing and handling requirements, and new response time and logistical mandates) in order to continue managing and regulating the state's hemp farming program. If a state's plan, which must be approved by USDA, doesn't satisfactorily meet the strict standards, the federal government will then become the agency responsible for managing the program in the state, and South Carolinians do not want that. According to the South Carolina state plan that has been approved by USDA, we will need to hire additional staff, including field inspectors, administrative personnel, and laboratory technicians, and meet associated recurring costs like laboratory analyses, inspection software, and network connectivity. We anticipate a total recurring annual program cost of \$1,600,000, with a potential revenue stream of \$483,000 from allowable fees, leaving a \$1,100,000 shortfall. Without this funding, SCDA will not be able to satisfy USDA's requirement for each state to certify that the state has resources and personnel to carry out the practices and procedures established under the Farm Bill.

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.

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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	5
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Agricultural Marketing
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$500,000 Federal: \$0 Other: \$0 Total: \$500,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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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 checked="" 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	

ACCOUNTABILITY OF FUNDS	3.1, 3.2
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	Vendors and contractors, through competitive bidding, existing state contracts, or other applicable state procurement regulations, would receive these funds. The state's marketing plan, which is updated regularly, is based on frequent consumer
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FUNDS

market research.

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

Additional funding would give the SC Department of Agriculture a greater ability to market Certified SC Grown agricultural products to the statewide buying public. The funds would specifically be used to promote the program through various medium, as well as further establishing direct-to-consumer sales opportunities (grocery stores, retail outlets, farm stands).

Because of COVID-19, many South Carolina farms have struggled to continue operations, due to school and restaurant closings. With that, many are now having to establish new sales channels. With nationwide research now pointing to consumers' demand of purchasing their food and agricultural products from local farmers and producers, it is extremely important to expand visibility of our brand, so that South Carolina farmers are benefiting from these new buying habits.

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:	Department Of Agriculture		
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FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	4
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Hemp Testing Equipment
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Provide a brief, descriptive title for this request.

AMOUNT	\$425,000
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What is the net change in requested appropriations for FY 2021-2022? 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 # Federal Hemp Farming Compliance	

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	2.1, 2.2
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	These funds would be used to source equipment from vendors on existing state contract, competitive bidding, or other applicable state procurement regulations.
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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 following laboratory equipment will be used to support and enforce the State Hemp Farming Program:

- To analyze hemp seed, flower, and finished hemp products for THC and CBD, using a High-Performance Liquid Chromatography with Ultra Violet (HPLC-UV).
- To provide a service type analysis for growers and processors, a Gas Chromatograph with Mass Selective Detector (GC-MS) and an Inductively Coupled Plasmas Mass Spectrometer (ICP-MS) will be used to analyze hemp and hemp products for residual solvents (adulterants) and heavy metals (toxins).
- Dedicated germinators for hemp are required to ensure there is no cross-contamination with other seeds.
- The purchase of field test kits to allow inspectors to sample hemp in the field for THC level prior to harvest and movement.

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:	Department Of Agriculture		
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FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	6
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Back-up Generator
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Provide a brief, descriptive title for this request.

AMOUNT	\$300,000
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What is the net change in requested appropriations for FY 2021-2022? 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 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	2.1, 2.2
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	Equipment will be sourced through vendors on existing state contract, through competitive bidding, or other applicable state procurement regulations.
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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**

A back-up generator is needed to protect and maintain power service to six different laboratories in two buildings during outages (\$300,000). This will protect tens of millions of dollars' worth of equipment from power surges, improper shut-down, and data loss. Keeping laboratories functional will allow SCDA continuity of state state-mandated inspection and testing of food, feed, and fuel during disaster response and recovery.

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.

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FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	7
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Farmland Conservation Study
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Provide a brief, descriptive title for this request.

AMOUNT	\$150,000
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What is the net change in requested appropriations for FY 2021-2022? 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 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 type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input checked="" type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	3.1, 3.2
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	This research would be coordinated and/or performed by the Agribusiness Center for Research and Entrepreneurship (ACRE).
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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 national farm economy is at its lowest point in decades. Rapid population growth and urbanization is occurring in South Carolina, and there is growing awareness of environmental sustainability. Production agriculture and forestry is a primary way to conserve natural resources and support rural communities. SCDA will evaluate the details of tools available to conserve working farm and forest land, program participation by landowners, and see what barriers may be limiting usage of existing programs. These include state and federal tax incentives for conservation easements, the federal Agricultural Conservation Easement Program (ACEP), South Carolina's Conservation Bank, and estate planning options. SCDA will evaluate what other state are doing to conserve farm and forest land, what is working, and what is not working. A report will recommend ways to leverage existing programs and guide future farmland conservation initiatives.

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.

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

TITLE	Agency Cost Saving and General Fund Reduction Contingency Plan
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AMOUNT	\$422,439
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What is the General Fund 3% reduction amount? This amount should correspond to the reduction spreadsheet prepared by EBO.

ASSOCIATED FTE REDUCTIONS	None
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How many FTEs would be reduced in association with this General Fund reduction?

PROGRAM / ACTIVITY IMPACT	<p>III. Marketing Services; A. Marketing & Promotions</p> <p>III. Marketing Services; E. Agricultural Center for Research & Entrepreneurship (ACRE)</p> <p>III. Marketing Services; F. Infrastructure Grants</p>
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What programs or activities are supported by the General Funds identified?

SUMMARY	<p>A 3% reduction in appropriated funds would be absorbed by Marketing and Promotions, ACRE, and Infrastructure Grant awards. The agency would reduce the promotion of the Certified SC branding program, which helps consumers identify agricultural products grown and/or produced in South Carolina and encourages the purchase of those products. This would negatively affect SCDA's ability to drive market demand and brand recognition, and subsequently hurt producers and consumers throughout the state. SCDA would reduce grant funding available for agribusiness research and development projects, and reduce matching grants to counties for recruitment of agribusiness-specific projects.</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

N/A (\$50,000 / measure)

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?

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FORM F – REDUCING COST AND BURDEN TO BUSINESSES AND CITIZENS

TITLE	South Carolina Egg Law Revision; SC Code Title 39, Chapter 39
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Provide a brief, descriptive title for this request.

EXPECTED SAVINGS TO BUSINESSES AND CITIZENS	\$2,000
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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	Mark "X" for all that apply:	
	<input checked="" type="checkbox"/>	Repeal or revision of regulations.
	<input checked="" type="checkbox"/>	Reduction of agency fees or fines to businesses or citizens.
	<input type="checkbox"/>	Greater efficiency in agency services or reduction in compliance burden.
	<input type="checkbox"/>	Other

METHOD OF CALCULATION	200 small egg producers saving \$10 each.
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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	Eliminate license fees for small egg producers and federally licensed processors.
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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	SC Egg Law: 39-39-10 to 39-39-40
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Which regulations does the agency intend to amend or delete? What is the enabling authority for the regulation?

SUMMARY	Proposed changes to the egg law include: exempting USDA-graded processors from having to also obtain a state license; add an exemption for small back-yard producers; allow for the off-farm sale of eggs from small producers direct to consumers; and allow the sale of quail eggs in the state for consumption.
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Provide an explanation of the proposal and its positive results on businesses or citizens. How will the request affect agency operations?