



**CITY OF SHELTON
APPLICATION FOR
LODGING AND TAX FUNDS
525 W Cota St.
Shelton, WA 98584**

1. PROJECT APPLICATION

DEADLINE: AUGUST 1 – AUGUST 31, 2020

Project Title: _____

Type of Project: Promotion Activities Facility Tourism Related Facility

Applicant: _____

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Applicants are: Non-Profit Public Agency

Contact Person (if different than applicant): _____

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Amount Requested: _____ Applicant's Match: _____

Calculated Total Project Budget: _____

Lodging Tax Funds are disbursed as per RCW 67.28.1816

To be considered, an application must be complete, adhere to the specified format, and be submitted with six (6) copies of all components.

2. PROJECT SUMMARY

In the space below, provide a concise summary of your request and what it will accomplish. If your request is part of a larger project, you may briefly describe the over-all project. However, please focus the bulk of your answer on the specific element for which you are requesting funding.

3. SCOPE OF WORK

Fully describe the project. Expand your summary paragraph from the “Project Summary” to address such issues as:

- What it is you wish to do?
- How and why the community would benefit?
- What are the beginning and ending dates of your project?
- What measures you will apply to evaluate your project’s success?
- Brief history of the event and/or organization.

Ensure that you respond to each portion of the directions. If you are requesting funds for a specific portion of a larger project please indicate that, but focus your response on the element for which you are requesting grant assistance. You may use additional pages as necessary. **Attachments to this section should be labeled as “3. Scope of Work.”**

4. COMMUNITY ECONOMIC IMPACT

Describe in detail who you expect to be most attracted by this project. (e.g., visitors traveling over 50 miles to Shelton, outside of county, out-of-state, international). Are visitors expected to be primarily day visitors, overnight visitors or extended stay (more than one night) visitors. If overnight visitors, identify the most likely site of their stay (e.g., camping or commercial lodging). Please report the approximate number of visitors generated by your event who will be staying at overnight local lodging. **Attachments to this section should be labeled "4. Community Economic Impact."**

5. RESOURCES AVAILABLE FOR EVENT OR FACILITY

What alternatives to Lodging Tax Funding have you or your organization explored? **Attachments to this section should be labeled "5. Resources Available for Event or Facility."**

6. MEETS TOURISM OBJECTIVES/BUILDS ON COMMUNITY ASSETS (Please Refer to Evaluation Criteria)

How does the proposal build on community assets? **Attachments to this section should be labeled: "6. Meets Tourism Objectives/Builds on Community Assets."**

7. PROJECT BUDGET

Please provide a detailed budget for your project. Specify whether your various match items will be cash (C) or in-kind (I/K). In addition to completing the chart below, if necessary you may also submit your budget in a different format. **Attachments to this section should be labeled "7. Project Budget."**

Budget Sheet

Project:

Item	Item Description	City	Match*	C	I/K	Total
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
Totals						

*While matching funds are not required, the amount of additional funds, supplies, materials and staff time an organization brings to an event is a good measure of that organization's commitment to success.

8. CASH FLOW REQUIREMENTS

Please indicate by quarter when you will need funds from the City. **Attachments to this section should be labeled "8. Cash Flow Requirements."**

QUARTER TO BE REIMBURSED	FUNDS REQUIRED/AMOUNT
1 st (January - March)	_____
2 nd (April - June)	_____
3 rd (July - September)	_____
4 th (October - December)	_____

Grand Total

The grand total should equal the amount requested from the City of Shelton on page one of this form.

9. PAST PERFORMANCE

If your group received Lodging Tax monies in the past, describe briefly the following:

(1) Project Goals (2) Project Budget (3) Were the project goals met (4) Any unanticipated results.

Attachments to this section should be labeled "9. Past Performance."

10. PROJECT TIMELINE

Attachments to this section should be labeled "10. Project Timeline."

MONTH	TASK ITEM
JANUARY	
FEBRUARY	
MARCH	
APRIL	
MAY	
JUNE	
JULY	
AUGUST	
SEPTEMBER	
OCTOBER	
NOVEMBER	
DECEMBER	

11. ATTACHMENTS

Please provide the following:

A. NON-PROFITS

1. Copy of state certificate of non-profit incorporation and/or federal copy of 501(c)(3) or 501(c)(6)
2. IRS Tax I.D. number
3. Copy of articles of incorporation
4. Copy of the most recent approved and proposed budgets of the overall organization
5. Copy of meeting minutes showing official approval of project and authorization of application or, a signed resolution of the board of directors authorizing the application
6. List of members of the organization's board of directors and principal staff

B. PUBLIC AGENCIES

1. Copy of meeting minutes approving project and authorization of application or a letter of resolution indicating official approval of project and application

C. COOPERATIVE PROJECTS

1. Describe reasons for and benefits of cooperative approach
2. List co-sponsors by title and type
3. Describe individual project responsibilities of co-sponsors

D. FOR-PROFITS

1. Copy of current/valid City of Shelton Business License
2. IRS Employer Tax I.D. number
3. Mission statement and brief biography of the firm's principals
4. Most recent fiscal year balance sheet

E. REIMBURSEMENT COMPLIANCE

If the applicant is a non-profit corporation (IRS 501(c)(3) or 501(c)(6) and is a recipient of tourism money to support their on-going operations, a quarterly reimbursement attestation must be provided for reimbursement. At the City's request, a copy of your current Annual Report must be provided per the recipient contract.

All recipients receiving tourism monies for an "Event" must provide receipts for relevant expenses to the Event. Receipts are required for reimbursement per the recipient contract.