**COLLIER COUNTY**

**TOURIST DEVELOPMENT COUNCIL (TDC)**

**GRANT FUNDING APPLICATION REQUEST**

**CATEGORY "B" MARKETING AND EVENTS GRANTS**

**FISCAL YEAR 2014-15**

**TIMETABLE FOR REVIEW:**

Completed applications must be received by the Tourism Department Office no later than 5:00 P.M. on Friday, April 18, 2014. Applications shall be delivered to the Tourism Development Department Office: 2800 North Horseshoe Dr, Naples, FL 34104. For further information, telephone (239) 252-2384.

The Tourist Development Council (TDC) will receive the recommendations from the Grant Review Panel, and will vote on each qualifying applicant and prepare, in priority order, their recommendations for funding for Fiscal Year 2014-15. Funding recommendations of the TDC will be presented to the Board of County Commissioners as part of the County’s budget process for FY 2014-15. After budget approval, contracts will be negotiated with the selected applicants, with assistance from the County Purchasing Department and the County Attorney's Office, and then presented to the BCC for final approval. Once executed, these contracts will be monitored and Requests for Fund Forms and Status Reports will be reviewed by the Tourism Director before submission to County Finance for reimbursement. No projects are approved and no funds may be expended until the contract is approved by the Chairman of the Board of County Commissioners. All materials submitted with applications will become a matter of public record, pursuant to Ch. 119, Fla. Stat.

**REQUIREMENTS:**

1. All collateral material and advertisements must identify the Collier County tourist development tax as a funding source. All printed material and all print and broadcast ads must contain the verbiage:

**“A cooperative effort funded by the Collier County Tourist Development Tax” and/or display the CVB logo and website (www.paradisecoast.com).**

1. Collier County policy requires submission to the Tourism Director or his designee the following: vendor invoices, copies of credit card receipts and statements and two-sided copies of cancelled checks, on-line bill pay transaction registers or other acceptable evidence of payment, original tear sheets of print ads showing publication name and date, affidavit of broadcast dates and times, screenshots of on-line ads showing date of capture, or samples of printed materials. The Grantee must verify in writing that the services or work performed as described in the invoice have been completed or that the goods have been received and that all vendors have been paid. Should these documents be unavailable, the Grantee may submit other legally viable evidence of payment subject to review and approval by the Clerk’s Finance Department. No advanced payments are authorized. There are no exceptions.

REPEAT FUNDING REQUESTS

 The Point System below will be used to determine the recommended level of funding for repeating applicants.

|  |  |
| --- | --- |
| Year of Funding Request  | Maximum % of Funding Allowed |
| 1st  | Up to 100% of Request |
| 2nd Year  | Up to 80% of Requested Funding |
| 3rd Year | Up to 60% of Requested Funding |
| 4th Year & Beyond | \*Up to 50% of Requested Funding |

\*Up to 50% funding may be recommended if room night projections from the last grant award was met. The amount and priority of funding recommended for approval will be based on the final score in the Evaluation process by the Grant Review Panel and the TDC. That total must be at least 75.

**AUTHORIZED USES OF TOURIST TAX FUNDS:**

Category “B” Tourist Tax Grant funding is available for the following types of uses.

1. Advertising and promotional campaigns supporting events or marketing projects in media such as broadcast, web and regional print and distribution and must be placed in media outside the Fort Myers DMA (De Soto, Charlotte, Glades, Lee, Hendry and Collier). Expenditures with these publications, broadcast and brochure distribution outside of the Ft. Myers DMA will be acceptable for reimbursement at full value. Coverage percentages in those outlets within Collier County will reduce the amount of reimbursement value available.
2. Printing and distribution of promotional pieces, creative design, printing, copying, ad placement cost and out of the Ft. Myers DMA (De Soto, Charlotte, Glades, Lee, Hendry and Collier) distribution of direct mail.
3. Creating an internet web site promoting the event linked to the County’s Tourism website to increase participation, attendance and awareness of the event and to generate hotel room nights and spending throughout the County.

**TOURISM FUNDS MAY NOT BE USED FOR:**

 1. Prize money, scholarships, awards, plaques, or certificates.

 2. Travel expenses related to any traveling exhibit, contest judges or staff travel.

 3. Projects restricted to private or exclusive participation.

 4. Private entertainment, food, and beverages and lodging.

1. 5. Operating expenditures directly or indirectly related to the project or event such as

 equipment or facility rental.

**TOURISM FUNDS MAY NOT BE USED FOR: (Cont)**

1. Legal, medical, engineering, accounting, auditing, planning, feasibility

 studies, consulting services or fees.

1. Salaries or supplements to salaries for existing or future staff, or employment of personnel directly or indirectly related to the project or event.

8. Tangible personal property including but not limited to office furnishings or equipment, permanent collections, or individual pieces of art.

 9. Interest or reduction of deficits and loans.

 10. Expenses incurred or obligated prior to or after the project period.

 11. Advertising and promotional materials distributed at the museum as part of an event, or
 after the event.

12. Payments for services or goods purchased for previous or other events.

13. Capital or infrastructure projects.
14. Payment for expenses that occur or are delivered prior to or after the effective date of the
 agreement with the grantee.

15. Deposits on exhibits.

**MARKETING GRANT CATEGORIES/GUIDELINES**

1. The recommended maximum grant amount of any single event is $25,000.
2. Priority for grant funding will be given to events held during our destination’s shoulder and slow season (May- November).
3. Events must be at least two (2) days in duration.
4. Events must generate at least 100 hotel room nights per day of the event.

**I Major Events**: Staged in the County that will attract large numbers of overnight visitors from outside the County. Examples are multiple-day art, food and entertainment festivals.

**II Sponsorships:** Minimum two-day events with 100 or more hotel room nights per day of the event. Funds are to be used exclusively for advertising and promotion in media with coverage outside the Fort Myers DMA (DeSoto, Charlotte, Glades, Lee, Hendry and Collier Counties).

**III First Time Events:** These include newly created events, or ones that have little history. Events in this category may be funded up to a maximum of $25,000 per event. Subsequent year funding will be determined by results of the first or subsequent year room night production resulting from the event.

**IV Cultural Events:** Two or more day events that bring significant number of out of area visitors to Collier County using the same guidelines as events listed above.

**V Marketing Assistance:** Organizations located in Collier County that request marketing assistance for projects highlighting more than one tourism business that further the mission of the TDC and the CVB and do not meet the guidelines for a Category C-2 Museum grant. Examples would be production of brochures, maps, special package promotions and facility marketing programs.

**APPLICATION FOR GRANT FUNDING**

**GENERAL INSTRUCTIONS**

1. Please submit **an original and fifteen (15) copies** of your completed application and all supporting documents for consideration by the Collier County Tourist Development Council. Please print on both sides of each page and reproduce copies in black and white only.
2. Complete each item of each applicable section. DO NOT SKIP ANY INFORMATION THAT APPLIES TO YOUR ORGANIZATION. Please call the Tourism Office at (239) 252-2384 with any questions.
3. Be sure to have your Chief Official and Secretary sign the application on the last page.
4. One copy of each of the following items is required and attached to original application:

( ) Charter, Articles of Incorporation, By‑Laws, Proof of Current State of Florida Status (except government entities)

( ) Minutes of meeting authorizing officers to apply for these tourism tax funds

( ) IRS Determination Letter of non-profit status

( ) Form 990 (except government entities)

( ) List of current Officers and Board members with terms, or mayor, City Council

( ) Organizational Chart

( ) Copy of financial statement of your most recent fiscal year reviewed or audited by a CPA (except government entities)

( ) Proof of Liability Insurance naming Collier County as an additional insured.

( ) Letters of Commitment from co-sponsors and matching funds contributors

Name of Grant Preparer: (Please Print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Grant Preparer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

**COLLIER COUNTY GOVERNMENT**

**TOURIST DEVELOPMENT COUNCIL GRANT APPLICATION**

**CATEGORY “B” MARKETING OR EVENT GRANTS FY 14-15**

 **I GENERAL INFORMATION**

To assist us in evaluating the impact your project may have on Collier County and to better understand what support you are requesting, the following questions must be answered in full.

(1) NAME OF ORGANIZATION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(2) NAME OF PROJECT OR EVENT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(3) MUSEUM INFORMATION:

 Contact Person’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(5) COMPLETE ADDRESS OF ORGANIZATION:

 STREET\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ST\_\_\_\_\_\_ZIP\_\_\_\_\_\_\_\_\_\_

 PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(6) ORGANIZATION'S CHIEF OFFICIAL’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 TITLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address if different from above:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(7) ORGANIZATIONAL STRUCTURE: ( ) NON-PROFIT ( ) GOVERNMENT AGENCY

 ( ) FOR-PROFIT ORGANIZATION

(8) GRANT AMOUNT REQUESTED: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(9) MATCH/LOCAL COST SHARE AMOUNT: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(10) **PROJECT TYPE (Check all that apply)**

( ) PROMOTIONAL MATERIALS (Brochures, flyers, website**)**

( ) MARKETING PROGRAM (Advertising, Public Relations, Digital or Social Media)

 ( ) OTHER (Describe)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(11) If the entire Tourist Tax funding request cannot be funded, may the project be restructured with less funding? ( ) YES ( ) NO

(12). **PROJECT DESCRIPTION**: describe in detail the project for which funding is requested

(13). **APPLICANT'S GRANT HISTORY**: Have you received previous grant assistance from the Collier County Tourist Development Council?

 ( ) YES ( ) NO. If “Yes”, specify the year (s), the project name, the amount of the grant awarded and the number of visitors and hotel room nights generated by the grant activity.

YEAR \_\_\_\_\_\_\_\_\_\_\_ PROJECT/EVENT NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PREVIOUS GRANT AMOUNT $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# VISITORS ATTRACTED: \_\_\_\_\_\_\_\_\_\_\_# HOTEL ROOM NIGHTS GENERATED\_\_\_\_\_\_\_\_\_\_

If you have previously received funding from the TDC, please attach a copy of your FINAL STATUS REPORT including attendance, economic impact and other information that will enable the TDC staff and review panel to evaluate your prior experience.

 (14). **MATCHING & OTHER FUNDING SOURCES**: List the sources and amounts of confirmed matching funds and planned revenue sources to support the amount of the grant. Tourist Tax grant funds cannot be the sole source of funding.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 $

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $

TOTAL MATCH/OTHER FUNDS: $

(15) Provide projections of the Direct Economic Impact this project will have on Collier County. The TDC office has a calculation model that you can use, if needed.

Projected # of Overnight Visitors \_\_\_\_\_\_\_\_\_\_\_ Hotel Room Nights \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tourist Tax Revenue $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Visitor Spending $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Economic Impact: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROJECT BUDGET RECAP**

**INCOME SOURCES:**

TOURIST DEVELOPMENT TAX GRANT REQUEST $\_\_\_\_\_\_\_\_\_\_\_\_

TOTAL ADDITIONAL FUNDING SOURCES (From previous page) $\_\_\_\_\_\_\_\_\_\_\_\_

OTHER INCOME SOURCES $ \_\_\_\_\_\_\_\_\_\_\_

 TOTAL INCOME - ALL SOURCES $ \_\_\_\_\_\_\_\_\_\_\_\_\_

**PROJECT EXPENSES:**

**Intended Uses of Tourist Tax Grant Funds:**

Please refer to authorized and unauthorized uses on pages 2 and 3. Provide an itemized summary indicating the intended use of Tourist Tax (TDT) funds. **Please be as explicit as possible, including planned cities where advertising or promotional materials will be placed. Indicate the total amount you plan to spend for each category or promotion.** Use additional sheets if necessary.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total Tourist Tax Funds Utilized:** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other Project Expenses not using Tourist tax grant funds:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total Other Project Expenses**: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL PROJECT EXPENSES $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Profit (Loss) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CERTIFICATION**

Please attach a copy of the Corporate Minutes authorizing this application for Tourist Tax Grant funds for the purposes stated in this application

**I have reviewed this Application for Grant Funds from the Tourist Development Council for FY 2014-15. I am in full agreement with the information contained herein and have the authority to request this funding on behalf of the organization. To the best of my knowledge, the information contained in this Application and its attachments is accurate and complete.**

**Chief Corporate Officer:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name and Title**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Corporation Secretary**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name and Title**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**