



**CATEGORY “C”
MUSEUM GRANTS
APPLICATION**

FY 2007-08

**COLLIER COUNTY
TOURIST DEVELOPMENT COUNCIL
GRANT FUNDING REQUEST
CATEGORY "C" MUSEUM GRANT APPLICATION
FISCAL YEAR 2007-08**

PART I - INSTRUCTIONS AND DEFINITIONS

PURPOSE:

This document sets forth the guidelines and categories for requests for funds from Tourist Development Taxes. Applications will be accepted from organizations that will promote tourism activities at their facilities during FY 2007-08 within Collier County that will bring substantial numbers of visitors to the County.

AUTHORIZATION HISTORY:

The Florida State Legislature enacted the Local Option Tourist Development Act (Section 125.0104, Florida Statutes) in response to the growing need of Florida counties to provide additional revenue sources for Tourist Development in an effort to stimulate the local economy. In response to this need, in 1990, the voters of Collier County approved a two (2) percent Tourist Development Tax on transient rental accommodations. A Tourist Development Council was also created in 1992 to assist the Collier County Board of County Commissioners (BOCC) in planning ways in which to use the revenues received through the Tourist Development Tax, based on statutory guidelines. The tax was increased to three (3) percent in 1996. The BOCC has the final determination of the allocation of TDC funds within the confines of F.S. 125.0104.

ALLOCATION OF THE TOURIST TAX

The four-percent (4%) Tourist Development Tax revenue is allocated by the Tourist Development Plan approved by the Board of County Commissioners as follows:

50% for beach park facilities or beach improvement, maintenance, renourishment, restoration and erosion control, including pass and inlet maintenance shoreline protection, enhancement, cleanup or restoration of inland lakes and rivers to which there is public access as these uses relate to the physical preservation of the beach, shoreline or inland lake or river.

13.4% for County owned or operated museums, to acquire, construct, extend, enlarge, remodel, repair, improve, maintain, operate or promote one or more county owned museums and for non-County owned museums that are owned and operated by not-for-profit organizations and open to the public.

36.6% for Advertising/Promoting and Special Events to bring tourism to Collier County.

TOURIST TAX ALLOCATION CONT.

Further regulations concerning the use of the Tourist Development Tax proceeds are outlined in the Florida State Statute 125.0104, and the Collier County Ordinance 92-60.

TIMETABLE FOR REVIEW:

The Tourist Development Council will distribute applications to organizations that express an interest in receiving funds for Fiscal Year 2007-2008 during the month of February 2007. Projects must meet the guidelines and criteria outlined in this document and must commence after October 1, 2007 and completed by September 30, 2008.

Completed applications should be submitted to the Tourism Development Department Office no later than 5:00 P.M. on Friday, March 30, 2007. Applications may be mailed or hand delivered to the Tourism Development Department office: 3050 North Horseshoe Dr, Suite 218, Naples, FL 34104. For further information telephone (239) 403-2384.

APPLICANT INSTRUCTIONS

ELIGIBILITY FOR FUNDING

Category "C" Museum funding is available through the Tourist Development Council and Collier County Board of County Commissioners. Per F.S. 125.0104, this funding is to acquire, construct, extend, enlarge, remodel, repair, improve, maintain, operate or promote one or more County owned or operated museums or museums that are owned and operated by municipalities or not for profit organizations that are open to the public.

APPLICATION AND EVALUATION PROCEDURE:

The following procedure will be strictly followed. Applicants are cautioned not to contact any member of the Collier County Board of County Commissioners (BCC) or Tourist Development Council (TDC) regarding their request. All contacts should be channeled through the TDC Director's office.

Please read the following instructions carefully and call the Tourism Department Office with any questions at 239-403-2384. Incomplete or incorrect applications will be returned.

The Tourist Development Council Director and a Review Committee made up of one hotel, one attraction and one cultural representative will review all applications to determine if they meet the established criteria for funding. Only those requests that will have a substantial economic impact on the County from visitors will be considered further. The Tourism Department office staff will notify qualifying applicants who are finalists. All finalists will then be invited to present their applications to the TDC in April.

The Tourist Development Council will vote on each qualifying applicant and prepare, in priority order, their recommendations for funding for Fiscal Year 2007-08. Funding recommendations of the Tourist Development Council are final. The recommendations will be presented to the Board of County Commissioners as part of the County's budget process for FY 2007-08.

After budget approval, contracts will be negotiated with the selected applicants, with assistance from 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 will be reviewed and approved by the Tourist Development Council Director. No projects are approved and no funds may be expended until the contract is approved and signed by the Chairman of the Board of County Commissioners.

All materials submitted with applications will become a matter of public record, open to inspection by any citizen of the State of Florida subject to Chapter 119, Florida Statutes.

SPECIAL NOTE:

In the event that any funding request is turned down, the organization will not be permitted to come back to the TDC or Board of County Commissioners for the same event until the next fiscal year. An exception would be made if new information not previously presented might alter the TDC's decision. In this case, the applicant must bring the request back to the TDC for further review before approaching the County Commission.

Matching Funds: Applicant must match the amount requested on a dollar-for-dollar basis, showing revenue specifically contributed from other sources. No more than 25% of this match may be in-kind. Evidence of the receipt of in-kind contributions must be submitted with any request for reimbursement of actual expenditures.

Funding Administration: No funding may be reimbursed until the Collier County Clerk of Courts Finance Department approves the Request for Funds and supporting documentation.

Documenting Economic Impact: Applicants will be required to periodically distribute and collect questionnaires provided by the Tourist Development Council or of their own design. These forms will assist in the tracking of participants' accommodations and spending patterns in Collier County while attending the event. The minimum number of required questionnaires must be equal to ten percent (10%) of annual attendance or one hundred-fifty (150) whichever is greater. (Attached, Exhibit "E" Page 19).

Applicants should be aware that the TDC staff will also survey hotels to confirm the data collected by the applicant.

STATUS REPORTS:

Preliminary Status Report: A preliminary status report is due at the time of submission of the application indicating an overall status of the project to the date of the application. (Form Attached – Exhibit "A" Page 15)

Interim Status Report: A detailed interim status report will be required quarterly during the project or with any interim Requests for Funds reimbursement. (Form Attached – Exhibit "B" Page 16).

Final Status Report: A detailed final status report is due within sixty (60) days of the close of the Project. (Form Attached – Exhibit "C" Page 17.)

PROCEDURES FOR DRAW OF FUNDS

A Request for Funds Form (Attached - Exhibit "D" Page 18) must be completed on a reimbursement basis only and made only after proof of paid invoices are presented. Reimbursement of funds must stay within the confines of the Project Expenses outlined in your application. Copies of paid invoices, cancelled checks, tear sheets, printed samples or other backup information to substantiate payment must accompany request for funds. The following will not be accepted for payments: statements in place of invoices; checks or invoices not dated; tear sheets

without date, company or organizations name. A tear sheet is required for each ad for each day or month of publication. A proof of an ad will not be accepted.

With each additional request for payment subsequent to the first request, Grantee is required to submit verification in writing that all subcontractors and vendors have been paid for work and materials previously performed or received prior to receipt of any further payments.

If project budget has specific categories with set dollar limits, the Grantee is required to include a spreadsheet to show which category each invoice is being paid from and total of category before payment can be made to Grantee. Organizations receiving funding should take into consideration that it will take a maximum of 45 days for the County to process a check.

AUDITS AND RECORDS

The organization receiving funds shall maintain such records and accounts, including property, personnel, and financial records as are deemed necessary by the County to ensure a proper accounting for all TDC funds. The aforesaid records will be made available for audit or inspection purposes at any time during normal business hours and as often as the TDC deems necessary. They shall be made available to the TDC for examination, all such records with respect to any matters covered by this funding application. The organization receiving funding will permit the same to be examined and excerpts or transcriptions made from such records and audits of all contracts, invoices, materials, records of personnel and of employment, and data relating to all matters covered by this application. The TDC's right of inspection and audit shall also apply to any audits made by any other agency whether local, state, or federal.

CRITERIA FOR EVALUATION OF APPLICATIONS

Applications will be scored in five (5) categories with a maximum score of one hundred (100) points per applicant.

I. **COMMITMENT TO THE EXPANSION OF OFF-SEASON TOURISM IN COLLIER COUNTY - Maximum 25 Points.**

Evidence that the project: serves to attract out-of-county visitors generating hotel/motel/campground rentals; will be marketed to the fullest extent possible in an effective and efficient manner; demonstrates a willingness of the organizers to work with the tourism industry; commitment to develop other funding sources in subsequent years.

II **OUT-OF-COUNTY PROMOTION- Maximum 25 Points**

Any proposed out-of-County advertising to support the project is well thought out and detailed to show the potential broad awareness of the event in out-of-market media. Packaging of hotels, attractions and shopping through tour operators or travel agents will also be evaluated.

III. **SOUNDNESS OF PROPOSED PROJECT - Maximum 20 Points.**

The extent to which the project has clearly identified objectives; has assigned responsibilities and accountability; has a realistic timetable for implementation; has additional funding sources available that will be utilized; will accomplish its stated objectives.

IV. **STABILITY AND MANAGEMENT CAPACITY - Maximum 15 Points.**

- A. A proven record or demonstrated capacities of the organization to develop resources, effectively plan, organize and implement the proposed project.
- B. The organization has a successful history of service in and to Collier County.
- C. Ability of the organization to administer public grants and to prepare and deliver the necessary progress reports to the Tourist Development Council.

V. **QUALITY AND UNIQUENESS OF PROPOSED PROJECT -Maximum 15 Points.**

Extent, to which the activity provides a program for Collier County visitors and its residents, which is of significant merit and that, without such assistance, would not take place in the County.

PART II

APPLICATION FOR FUNDS

GENERAL INSTRUCTIONS

Please submit **an original and twenty (20) copies** of your completed application (Pages 8-14) and all supporting documents for consideration by the Collier County Tourist Development Council.

Complete each item of each applicable section. **DO NOT SKIP ANY INFORMATION THAT APPLIES TO YOUR EVENT.**

Please call the TDC Director at (239) 403-2384 with any questions.

Be sure to have your Chief Official and Secretary sign the application on the last page.

One copy of the following items is required and should be attached to your original application:

- () Charter, Articles of Incorporation, By-Laws, Proof of Current Status
(except government entities)
- () Minutes of meeting authorizing officers to apply for these tourism tax funds
- () IRS Determination Letter of non-profit status (except government entities)
- () List of current Officers and Board members with terms and salaries, or mayor, City Council
- () Organizational Chart
- () Copy of financial statement of your most recent fiscal year (except government entities)
- () Proof of Liability Insurance
- () Letters of Commitment from co-sponsors and matching funds contributors

Name of Preparer: (Please Print) _____

Signature of Preparer _____

**COLLIER COUNTY GOVERNMENT
TOURIST DEVELOPMENT COUNCIL GRANT APPLICATION
SPECIAL CATEGORY "C" MUSEUM GRANT FY 07-08**

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 _____

(3) PROJECT INFORMATION:

STREET ADDRESS: _____

(4) CONTACT PERSON _____

(5) COMPLETE ADDRESS OF ORGANIZATION:

STREET _____

CITY _____ ST _____ ZIP _____

PHONE: _____ FAX: _____

(6) ORGANIZATION'S CHIEF OFFICIAL: _____

TITLE: _____ Address if different from above:

PHONE: _____ FAX: _____

(7) TYPE OF APPLICANT: () NON-PROFIT () GOVERNMENT AGENCY
() FOR-PROFIT ORGANIZATION

(8) GRANT AMOUNT REQUESTED: \$ _____

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

(10) PROJECT TYPE (CHECK ONE)

- MUSEUM EXHIBIT ACQUISITION & DEVELOPMENT PROJECT
- ARCHAEOLOGICAL SITE SURVEY
- COMMUNITY EDUCATION PROGRAM
- HISTORIC RESTORATION
- EDUCATIONAL MATERIALS
- HISTORIC SITE DESIGNATION (NATL REGISTER OF HISTORIC PLACES)
- HISTORICAL MARKER
- OTHER _____

(11) IF ENTIRE REQUEST CANNOT BE FUNDED, MAY THE PROJECT BE RESTRUCTURED WITH LESS TDC FUNDING? YES NO

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

13. **VISUAL PLAN FOR PROJECT:**

Provide a 3x5 photograph, drawing, or conceptual view of the property, site or exhibit.

14. **ANNUAL MAINTENANCE:** If applicable, what is the anticipated cost of annual maintenance of the historic property, site, marker, exhibit or program upon completion of the project? Who will be responsible for annual maintenance and what is the source of on-going funding?

15. **APPLICANT'S GRANT HISTORY:** Have you received previous grant assistance from the Collier County Tourist Development Council? If so, specify the year, the project name and the amount of the grant awarded.

YEAR _____ PROJECT NAME _____

PREVIOUS GRANT AMOUNT \$ _____

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 committee to evaluate your prior experience.

16. How long will it take you to complete this project? _____

17. **MATCHING FUNDING SOURCES:** List the sources and amounts of confirmed matching funds. No more than 25% of the total project matching funding may be in-kind contributions. Documentation that the donation has been received must accompany any Request for Funds

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL MATCHING FUNDS:	\$ _____

18. Provide a brief explanation of the Direct Economic Impact this project will have on the surrounding community. This estimate should be based on the projected number of out of County visitors to the project that could potentially stay overnight. The TDC office has a calculation model that you can use, if needed.

19. What is the current or anticipated annual visitation to your project/facility? _____

II DETAILS ON YOUR ORGANIZATION:

In narrative form please describe your organization in the following areas. Use a separate sheet to complete these questions in detail.

- (1) What are your organization's goals and objectives?
- (2) What services does your organization provide?
- (3) How will your organization monitor expenditure of funds?
- (4) How will your event bring additional visitors and hotel room nights to Collier County?
- (5) What is your organization's experience in managing sponsorships and grants?
- (6) What is your organization's current annual operating budget? \$_____

PROJECT BUDGET RECAP

INCOME SOURCES:

TOURIST DEVELOPMENT TAX REQUEST \$ _____

ADDITIONAL FUNDING SOURCES (Must equal or exceed TDC funding request)

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

TOTAL ADDITIONAL FUNDS \$ _____

OTHER INCOME SOURCES

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

TOTAL OTHER INCOME \$ _____

TOTAL INCOME - ALL SOURCES \$ _____

PROJECT EXPENSES:

Intended Utilization of Tourist Tax Funds

Provide an itemized summary indicating the intended use of TDC funds. **Please be as explicit as possible, including intended publications, promotional materials, etc. and how much money will be expended for each category.** Use additional sheets if necessary.

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total Tourism Funds Utilized: \$ _____

Other Project Expenses

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total Other Project Expenses \$ _____

TOTAL PROJECT EXPENSES \$ _____

Profit (Loss) \$ _____

CERTIFICATION

I have reviewed this Application for Funds from the Tourist Development Council for FY 2007-08. I am in full agreement with the information contained herein. To the best of my knowledge, the information contained in this Application and its attachments is accurate and complete.

Chief Corporate Officer

Date

**Seal
Document** _____
Corporation Secretary

Date

EXHIBIT "A"

**Collier County Tourist Development Council
Preliminary Status Report**

EVENT NAME: _____

REPORT DATE: _____

ORGANIZATION: _____

CONTACT PERSON: _____ **TITLE:** _____

ADDRESS: _____

PHONE: _____ **FAX:** _____

=====

On an attached sheet, answer the following questions and attach it to your application.

PRELIMINARY INFORMATION:

- ➤ Is this a first time project? If not, please give details of past projects.
- ➤ Do you anticipate using area hotels in support of your project?
- ➤ If so, what are the estimated hotel rooms nights generated by project?
- ➤ What is the estimated revenue generated by this project?
- ➤ What is the estimated number of participants expected to visit the project?
- ➤ If project planning is in progress, what has been done, what remains to be done, and are there any problems?
- ➤ If the project planning has not been started, why?
- ➤ List any planned out-of-county advertising, marketing, and/or public relations that will be used in support of the project.

EXHIBIT "B"

Collier County Tourist Development Council Interim Status Report

EVENT NAME: _____

REPORT DATE: _____

ORGANIZATION: _____

CONTACT PERSON: _____ TITLE: _____

ADDRESS: _____

PHONE: _____ FAX: _____

=====

On an attached sheet, answer the following questions to identify the status of the project. Submit this report at least quarterly.

INTERIM – These questions will identify the current status of the project. After the TDC staff reviews this Interim Status Report, if they feel you are behind schedule on the planning stages, they will make recommendations to help get the project stay on schedule.

- ➤ Has the planning of this project started?
- ➤ At what point are you at with the planning stage for this project?
(Percent of completion)
- ➤ Will any hotels/motels be utilized to support this project?
- ➤ If so, how many hotel room nights will be utilized?
- ➤ What is the total dollar amount to date of matching contributions?
- ➤ What is the status of the advertising and promotion for this project?
- ➤ Have your submitted any advertisements or printed pieces to the TDC staff for approval? Please supply a sample and indicate the ad schedule.
- ➤ How has the public interest for this project been up to this point?

EXHIBIT "C"

**Collier County Tourist Development Council
Final Status Report**

EVENT NAME: _____

REPORT DATE: _____

ORGANIZATION: _____

CONTACT PERSON: _____ **TITLE:** _____

ADDRESS: _____

PHONE: _____ **FAX:** _____

=====
On an attached sheet, answer the following questions for each element in your scope of work.

Final – These questions should be answered for your final status report.

- ➤ Was this a first time project? If not, how many times has this event taken place?
- ➤ What hotels/motels were utilized to support the project and how many?
- ➤ What is the total revenue generated for this event?
- ➤ Total expenses. **(Have all vendors been paid)**
- ➤ List the vendors that have been paid, if not, what invoices are still outstanding and why?
- ➤ What is the number of participants that visited the project?
- ➤ What is the percentage of the total participants from out of Collier County?
- ➤ What problems occurred if any during the project event?
- ➤ List any out-of-county- advertising, marketing, and/or public relations that was used to support the project and attach samples.
- ➤ How could the project been improved or expanded?

EXHIBIT "D"
REQUEST FOR FUNDS
COLLIER COUNTY TOURIST DEVELOPMENT COUNCIL

EVENT NAME _____

ORGANIZATION _____

ADDRESS _____

CONTACT PERSON _____ TELEPHONE () _____

REQUEST PERIOD FROM _____ TO _____

REQUEST# _____

() INTERIM REPORT () FINAL REPORT

TOTAL CONTRACT AMOUNT \$ _____

<u>EXPENSE</u>	<u>BUDGET</u>	<u>REIMBURSEMENT REQUESTED</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
TOTALS	_____	_____

NOTE: Reimbursement of funds must stay within the confines of the Project Expenses outlined in your application. Copies of paid invoices, cancelled checks, tear sheets, printed samples or other backup information to substantiate payment must accompany request for funds. The following will not be accepted for payments: statements in place of invoices; checks or invoices not dated; tear sheets without date, company or organizations name. A tear sheet is required for each ad for each day or month of publication. A proof of an ad will not be accepted.

Each additional request for payment subsequent to the first request, Grantee is required to submit verification in writing that all subcontractors and vendors have been paid for work and materials previously performed or received prior to receipt of any further payments.

If project budget has specific categories with set dollar limits, the Grantee is required to include a spreadsheet to show which category each invoice is being paid from and total of category before payment can be made to Grantee. Organizations receiving funding should take into consideration that it will take a maximum of 45 days for the County to process a check.

Furnishing false information may constitute a violation of applicable State and Federal laws.
CERTIFICATION OF FINANCIAL OFFICER: I certify that the above information is correct based on our official accounting system and records, consistently applied and maintained and that the cost shown have been made for the purpose of and in accordance with, the terms of the contract. The funds requested are for reimbursement of actual cost made during this time period.

SIGNATURE _____ TITLE _____

EXHIBIT "E"

VISITOR QUESTIONNAIRE

Thank you for taking the time to complete the following questions. This information will afford us the opportunity to better serve the needs of Collier County visitors.

NAME:

ADDRESS: CITY ST ZIP

DATE OF ARRIVAL: DATE OF DEPARTURE:

WHERE ARE YOU STAYING? HOTEL FRIENDS CAMPGROUND

NAME OF HOTEL AND CITY:

NAME OF CAMPGROUND:

OF ROOMS OCCUPIED x NUMBER OF NIGHTS YOU WILL STAY =

HOW DID YOU SELECT THE HOTEL/CAMPGROUND?

INTERNET YOUR CHOICE TRAVEL AGENT

OTHER:

NUMBER OF MEALS YOU OR YOUR GROUP will eat out. (Please provide a number determined by the number of people in your party times the number of days of your visit times the number of meals that will be eaten out each day.)

= _____

AREA ATTRACTIONS YOU PLAN TO VISIT: (Please Circle)

Caribbean Gardens, The Zoo in Naples	Naples/Marco Princess	Corkscrew Swamp Sanctuary	Naples Pier
Water sports/Parasailing	Everglades National Park	Everglades Airboat Tour	The Conservancy's Nature Center
King Richards Fun Park	Rookery Bay	Seminole Casino	Teddy Bear Museum
Delnore-Wiggins State Park	Fakahatchee Strand Preserve	Lake Trafford	Other: Please name below

PLEASE REFER TO OUR COLLIER COUNTY BROCHURE FOR LOCATION OF AREA ATTRACTIONS.

Collier County Tourist Development Council

PLEASE INCLUDE THIS CHECKLIST WITH YOUR FINAL SUBMISSION TO INSURE THAT ALL REQUESTED DOCUMENTS ARE INCLUDED.

PLEASE ATTACH ONE COPY OF EACH OF THE FOLLOWING ITEMS TO YOUR ORIGINAL APPLICATION FOR OUR FILES: (It is not necessary to provide a copy of these items with the 20 copies.)

- Charter, Articles of Incorporation, By-Laws, Proof of Current Status, i.e. Annual Report on file with the Secretary of State – **Except Government entities.**
- Minutes of meeting authorizing officers to apply for these tourism funds.
- IRS Determination Letter – **Except Government entities.**
- List of current officers and board members, indicating terms, **or mayor, City Council, etc.**
- Organization Chart
- Copy of financial statement for the most recently completed fiscal year – **Except Government entities.**
- Letters of commitment from co-sponsors;
- Income and expense details
- Signed by Chief Officer and Secretary.

Name of Preparer: (Print) _____

Signature of Preparer: _____