

APPLICATION FOR LTAC FUNDS

LODGING TAX ADVISORY COMMITTEE (LTAC)
CITY OF SELAH



TITLE OF EVENT: _____

APPLICANT INFORMATION

NAME OF ORGANIZATION: _____

Physical Address: _____

Form of organization: _____

Website: _____

Agency Tax ID: _____

UBI: _____

Organization is a (select one): _____ Government Entity
_____ 501©3
_____ 501©6
_____ Other _____

PRIMARY POINT OF CONTACT

Name: _____

Phone: _____

Email: _____

Fax: _____

Project/Event Name: _____

Project/Event Date: _____

Project/Event Location: _____

Tourism Seasons: From the list below, what season will your project enhance tourism? Please indicate the appropriate season.

<u>Season</u>	<u>Months</u>
_____ Year-Round	January-December
_____ Off Season	November-February
_____ Shoulder Season	October or March-May
_____ High Season	June-September

REQUESTED FUNDING

Can you operate this project with reduced funding? _____

Priority #1: \$ _____ Priority #2: \$ _____

Will there be admission charged for this activity? _____

If yes, how much per person? \$ _____

ACTIVITY INFORMATION

Please describe the activity or organization. For festivals or events, include the name, dates of operation and expected number of participants. For operations, include the expected number of visitors.

PLEASE COMPLETE THE FOLLOWING REGARDING FUNDING FOR YOUR EVENT.

Can you operate this project without LTAC Funds? _____

Priority 1 - Full amount requested: _____

Priority 2 – Partial amount requested: _____

Will there be admission charged for this activity? _____

Please provide estimates the number of people traveling out of town to your event:

Away from their place of resident or business and staying overnight in paid accommodations:

_____ To a place 50 miles, one way, from their place of residence or business for the day or overnight:

_____ From another country or state outside of their place of residence or business:

COORDINATION AND COLLABORATION

The mission of the LTAC committee is to promote tourism activity to the City of Selah. Please provide information about any other organizations or agencies involved in this project/activity and how this project directly contributes to the Selah LTAC Plan.

Describe how you will promote your event/activity to attract tourists from outside of Selah:

Describe how you will promote lodging establishments, restaurants, and businesses within the City of Selah as it pertains to your event:

BUDGET

Income: If you are anticipating receiving partial funding for this activity from another source, please list the source, approximate amount and the status of funding.

Amount	Source	Confirmed	Dates Available	Notes
Total Income:				
What percentage of your project does your request for city funds represent?				

Expense: Please estimate your expected expenses for this event.

Activity	LTAC Funds	Other Funds	Total
Personnel (salaries):			
Administration:			
Marking/Promotion:			
Direct Sales Activities:			
Minor Equipment:			
Travel:			
Contract Services:			
Other Activities:			
Total Cost:			

SCHEDULE AND USE OF FUNDS

The LTAC committee will approve funds for projects and events in the current calendar year only. Funds can ONLY be used for the event and date listed in the contract. Approved funds can be accessed in the following ways:

Funds must be used as directed by the LTAC committee listed at the end of this contract.

Applicants must adhere to the following payout agreements:

- Event promotion in radio, digital, or television advertising - For date-specific events, advertising the day of the event and up to 10 days prior to the event may be reimbursed at 100% of the cost.
- Printed flyers or posters: LTAC funds may be available for up to 100% reimbursement.
- Dated material such as (but not limited to) shirts, bags, tangible promotional items: LTAC funds may be available for up to (but not exceeding) 50% reimbursement.
- Deposits for reservation of services, vendors, or contractors: LTAC funds may be available for up to 100% reimbursement.

PAYOUT SCHEDULE

Approved funds will be dispersed based on reimbursement when receipts are provided to the City. No blanket checks for approved funds will be provided. If deposits or funds are required before the event date, an official quote from the vendor or request from the applicant must be submitted with the application. Approved funds can only be used for the event listed on the application, not for future events (even if it's the same event for the following calendar year).

----- **(APPLICANT INITIALS)**

EVENT CANCELLATIONS

If an event is canceled due to unforeseen circumstances, all LTAC funded payments must be returned to the City and the LTAC budget within 90 days of event cancelation.

----- **(APPLICANT INITIALS)**

REPORTING

The State of Washington requires municipalities to report on the use of funds for the year. Specific questions are included in the application form for this purpose. Additionally, all recipients of lodging tax revenue, regardless of what the revenue is to be used for, must submit a post-event activity report to the City describing the actual number of travelers generated.

CITY OF SELAH TOURISM PROMOTION APPLICATION INFORMATION

The City will, as part of the contract with the recipients, require that the post-event report be provided after the event or activity, but no later than January 31st of the next year. The City compiles all report information, then files an annual report to the State of Washington Joint Legislative Audit and Review Committee (JLAR C) by March 15th of the following year.

----- **(APPLICANT INITIALS)**

The post-event activity report must include the following:

- Total amount spent on the event.
- The number of participants who attended the event/activity in each of the following categories:
 - Staying overnight in paid accommodations away from their place of residence or business;
 - Staying overnight in unpaid accommodations (e.g. with friends and family) and traveling fifty miles or more one way from their place of residence or business;
 - Staying for the day only and traveling more than fifty miles or more one way from their place of residence or business;

- Attending but not included in one of the three categories above.
- The estimated number of participants in any of the above categories that attended from out-of-state (includes other countries).
- A description of methods used to determine attendance and distinguish among the visitor categories at the event/activity.

----- **(APPLICANT INITIALS)**

Any recipient awarded funding must complete the reporting requirements.

APPLICANT SIGNATURE

THE APPLICANT HEREBY CERTIFIES AND AFFIRMS: 1. THAT IT DOES NOT NOW, NOR WILL IT DURING THE PERFORMANCE OF ANY CONTRACT ARISING FROM THIS APPLICATION, UNLAWFULLY DISCRIMINATE AGAINST ANY EMPLOYEE, APPLICANT FOR EMPLOYMENT, CLIENT, CUSTOMER, OR OTHER PERSON WHO MIGHT BENEFIT FROM SAID CONTRACT, BY REASON OF AGE, RACE, COLOR, ETHNICITY, SEX, RELIGION, CREED, PLACE OF BIRTH, OR DEGREE OF HANDICAP. 2. THAT IT WILL ABIDE BY ALL RELEVANT LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS AND 3. THAT IT HAS READ THE INFORMATION CONTAINED IN PAGES 1, 2, AND 3 AND UNDERSTANDS AND WILL COMPLY WITH ALL PROVISIONS THEREOF.

Certified By (Signature): _____

Print or type name: _____

Title: _____

Date: _____

FOR LTAC BOARD USE ONLY

Accepted/Denied: _____

Amount Approved: _____

Specific directions for use of funds: _____

Chairperson Signature: _____

Date: _____