

STATE ACCOMMODATIONS TAX FUNDING PROGRAM CITY OF NORTH AUGUSTA NORTH AUGUSTA, SOUTH CAROLINA

FY 21-22 GRANT APPLICATION

(Application must be typed)

<u>DEADLINE:</u> Applications must be received no later than <u>Wednesday November 30, 2022 at 4:00 p.m.</u> Applicants must follow the procedures in the *City of North Augusta State Accommodation Tax Handbook* when completing this application. A project representative must attend a "Question & Answer Session" with the committee on <u>Tuesday</u>, <u>December 6, 2022 at 9:30 a.m.</u> at the City of North Augusta Municipal Center.

Answer Session" Augusta Municip		ee on Tuesday	, December	6, 2022 at 9:30 a.m.	at the City of No
	Amount you are	requesting:			
	Project Title:	requesting.			
	Project Location	:			
This is a 50/50 ma	atching reimburseme	ent program. Ap	plications mu	ust match 50% of the fu	nds requested.
Name of Organ	nization				
Contact Name	and Title				
Mailing Addres	S				
Street Address	(if different)				
Phone Number	•				
City, State and	Zip Code				
Email Address					
Website					
How long has y	our organization b	een in existend	ce?		
Tourism- Operatio Tourism- To qualify for this grant,	ion Advertising/Pro- Related Event on of Visitor Center Related Public Ser- projects must be able to jus	vice	Touri	st Public Transportati sm-Related Facility s from over 50 miles.	on
Project Period: E			_ End		
Tax Status (chec	·	be within Januar	y 1, 2023 – De	cember 31, 2023)	

City of North Augusta

Other (specify)

Tax-exempt charitable organization (501c3)

Other Tax-exempt (specify status)
Church/Religious organization

Governmental unit

Federal State Local

Unincorporated association

Briefly state the history and mission of your organization.				
Please give a detailed description of your project and	d include your target audience.			
ESTIMATED TOTAL ATTENDANCE:	ESTIMATED TOURIST:			
ESTIMATED ROOM NIGHTS:	ESTIMATED MEALS:			
DESCRIBE HOW YOUR ORGANIZATION DETERMINED THE NUMBERS ABOVE:				

Please fill out the amount of grant funds requested in your project category

	FY 21-22 AMOUNT REQUESTED
Advertising or promotion related to tourism development (Check all that apply)	\$
Television Radio Newspapers Websites Magazines Rack Cards Billboards Mailings (Out of City) Visitor's Guide Other (Specify)	
Promotion of the arts and cultural events Specify:	\$
Construction, maintenance, and operation of facilities for civic and cultural activities Specify:	\$
Law enforcement, fire protection, solid waste collection, and health facilities when required to serve tourist and tourist facilities Specify:	\$
Public facilities such as restrooms, dressing rooms, parks, and parking lots Specify:	\$
Tourist shuttle transportation Specify:	\$
Operating visitor information centers Specify:	\$
TOTAL REQUEST	\$

List funds/ budget for the project for FY 21-22 and the sources of these funds. (Be sure to include any other A-Tax funds requested or received from other municipalities.)

SOURCE	AMOUNT	Pending or Received
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
TOTAL	\$	

This is a 50/50 matching reimbursement program. Applications must match 50% of the funds requested. The applicant pays up front then receives up to 50% back in a reimbursement check.

Ī	FOURISM IMPACT Please explain how your project, event, or program attracts visitors (over 50 miles) to the area and promotes tourism. Discuss the activities or project in detail, and give timetable for mplementation. Include past attendance numbers and room nights generated if applicable.
1	An additional sheet of paper may be attached, if needed.
[Describe how the program will be evaluated. Include methods of measuring tourism impact,
ć	and the data collection methods.

An additional sheet of paper may be attached, if needed.

Describe how this project will benefit the economy in the City of North Augusta.			
An additional sheet of paper may be attached, if needed.			
MARKETING AND MEDIA INFORMATION			
Marketing and media information is requested to show how your organization will u	use		
advertising and promotion of tourism to increase tourism in North Augusta. Any market	ing		
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An additional sheet of paper may be attached, if needed.

Each applicant will be required to participate in the "Question and Answer Session":

Before funding is approved, a project representative will interview with the City of North Augusta State Accommodations Tax Advisory Committee to discuss the project application on **Tuesday, December 6, 2022 at 9:30 a.m.** All questions regarding the application will be discussed at this time.

Required Application Packet Information

\mathbf{O}	Letter from IRS confirming tax exempt status AND/OR
O	Proof of registration and good standing with the SC Secretary of State's Office as a nonprofit
O	Attach list of current Board of Directors or Governing Board
O	Prepared 10 copies of the application
\mathbf{O}	Secured each application with a staple, paper clip or binder clip. No report folders, please.

REMINDERS

The application deadline is Wednesday, November 30, 2022 at 4:00 p.m. LATE or INCOMPLETE applications will NOT be considered.

REIMBURSEMENT PROCESS

At the completion of the grant funded project, the City of North Augusta requires grantees to complete an accountability report. Grantees must acknowledge the receipt of the City of North Augusta Accommodations Tax funds by adding the statement "Funding Assistance provided by the City of North Augusta through Accommodations Tax Funds" on all projects. For marketing and promotional materials the City of North Augusta logo should be visible. A sign must be posted at the project location for all award recipients.

Accountability Report must include:

- 1. A written summary of the project
- 2. A budget, noting the expenses that were outlined on your application
 - a. A written account of income associated with this project
 - b. A written account of expenditures associated with the project
- 3. Copies of your cancelled checks and/or receipts and invoices pertaining to the funds we award you and matching funds. Receipts and invoices must be within the dates of the grant cycle.
- 4. A marketing plan of how you will promote the project
- 5. Any advertisements or promotional material
- 6. Photographs (5 or more) of the project and one additional photo showing your acknowledgment of "Funding Assistance Provided by City of North Augusta through Accommodations Tax Funds" posted at the project location
- 7. Survey results from event/attraction associated with this project
 - a. Total number of attendees
 - b. Number of attendees from out of town
 - c. Accommodations out of town guests plan to use or did use

Statement of Assurances

If the grant application is awarded funding, we agree, as representatives of the organization named in this application, to provide any and all records pertaining to this grant for inspection by the City of North Augusta State Accommodations Tax Committee upon request.

Project Coordinator				
Name (typed)	Signature	Date		
Non-Profit Organization/Sponsor Administrative Official's				
Name (typed)	Signature	Date		

MAIL TO:

City of North Augusta
State Accommodations Tax Funding Program
P.O Box 6400
North Augusta, SC 29861
Attention: Jamie Paul, City Clerk

<u>OR</u>

DELIVER TO:

City of North Augusta Municipal Center State Accommodations Tax Funding Program 100 Georgia Avenue, Third Floor North Augusta, SC 29841 Attention: Jamie Paul, City Clerk Complete applications must be received by:

Wednesday,

November 30, 2022

by 4:00 p.m.