

SPECIAL EVENT GRANT APPLICATION

GENERAL INSTRUCTIONS

The application must be completely filled out. "Not Applicable" or "N/A" should be marked, as appropriate.

Copies of the following items must be attached to your application:

- List of Applicant's current Officers and/or Board members (if applicable)
- Applicant's W-9 tax form for post-event payment (A Supplier Form may be required if new to doing business with Clay County).

Please note: All final paperwork, as outlined in the application, must be submitted to the TDC within 60 days of the conclusion of the Event. The request for reimbursement will be considered incomplete until all of the required forms are submitted to the TDC.

CLAY COUNTY TDC SPECIAL EVENT FUNDING REQUEST APPLICATION

Please select all that Event qualifies for

- Contributes to the Quality of Life- \$1,500
- Multi-Day Event- \$1,500
- Event occurs during Need Period- \$500
 - (Jan, Feb, June, July, Aug, Sept, Nov)

Amount Requested from TDC: \$_____ (Not to exceed \$3,500)

Name of Event:

Date(s) of Event:

General Information

Name of Applicant:

Contact Person:

Contact Person's Email:

Complete Address of Applicant:

Cell Phone:

Applicant's Chief Official/Director's Name:

Person's Title:

Address if different than above:

Cell Phone:

Email:

Has the Event ever received funding from a TDC? Yes No

- If yes, please list destinations, years, and amounts:

Intended use of funds (Refer to Grant Guidelines- Eligible and Ineligible Uses of Funds):

Details about Applicant (Describe your business or organization):

Event Specific Information

Event/Project name:

Type of event:

Location of Event:

Number of days:

Time(s):

Projected number of visitors per day:

Trip: Name of promoter: _____

Company name:

Contact name:

Address:

Phone:

Email:

Website:

Admission Price (if applicable):

Provide the previous year's event information (if applicable):

Previous: Date of

Previous Event:

Event Specific Information

Location:

Contact Name/Phone:

Funding amount awarded:

GRANT APPLICATION CHECKLIST

Please initial next to each item and fill in the blanks below. This list must accompany the grant application.

Initials

I understand that the reimbursement request must be completed and submitted to the Tourism Office with all backup and supporting material no later than 60 business days after the event ends, which will be on (date 60 days after Event ends). If the supporting documentation deadline is not met, a written, formal request must be sent to the Tourism Office before the said deadline.

I will obtain the signatures of the organization's designated contact on the proposed grant contract. I understand that I will need to enter into a Grant Agreement with the County Manager signed via Adobe Sign.

I have included an IRS W-9 Form, and a copy of the Florida Division of Corporations form with the application. A Clay County Supplier Form must be on record.

I understand that someone representing this grant application must be available at the TDC meeting when it considers it for funding; otherwise, the application will not be considered.

I understand that no expenses incurred before the TDC recommends approval of the grant application will be reimbursed under any circumstances. I also understand that no funding has been approved until the Board of County Commissioners (BOCC) approves the execution of the Grant and that no expenditures will be reimbursed if the BOCC does not approve the execution of the Grant.

GRANT APPLICATION CHECKLIST

I understand that this event may require a Clay County Event Permit (Event, Amusement, Temporary, Structure, Sales, etc.), and it is up to me to complete that permit request and pay the required permit fee. I have reviewed the **Clay County Special Event Permit Flow Chart** and will proceed with any required county permits. (Contact: Jason Clark, Event Permit Coordinator- 904-529-4148).

I have included a list of my business/organization's current Officers and/or Board members (if applicable) with the application.

GRANT APPLICATION CHECKLIST

I acknowledge that any material made or received by Clay County in connection with my request for Grant funding is a public record and subject to public inspection unless there is a legislatively created exemption that makes it confidential and not subject to disclosure. I acknowledge that I cannot dictate to Clay County what material is open to public inspection or the circumstances under which material is deemed confidential.

I understand that all funds received are subject to audit by the Clay County Clerk of the Court - Internal Auditor and/or other representative as Clay County may designate.

Title:

Date:

Authorized Agent Signature:

After completing your application, please compile all your documents for the Event Budget, Marketing Plan, and Event Emergency Plan. You can email the application and file to CCTourism@claycountygov.com or deliver them in person to the Clay County Tourism Office, located on the bottom floor of the Clay County Administration Building at 477 Houston Street, Green Cove Springs, Florida, 32043.