**B A K E R C O U N T Y T R A N S I E N T L O D G I N G T O U R I S M G R A N T**



 **About the Grant Program**

This is a program sponsored by the Transient Lodging Tax Committee (TLTC) to promote tourism and economic vitality in Baker County either in the form of an event or tourism enhancement. The TLTC will review applications on an ongoing basis. Grant funding begins July 1st of each year. Funding is limited, therefore it is prudent to plan ahead and apply as early as possible. When current year funds are depleted, grants requests will be funded the following year (July 1st).

 **Eligibility**

The Event Grant program is open to all individuals, businesses, or organizations in Baker County. Applicants from outside of Baker County are not eligible to apply unless the project provides a direct benefit to tourism or economic vitality in Baker County. The event should enhance all areas of Baker County.

 **Criteria**

* The event will enhance the food, retail and lodging revenues in Baker County.
* The event should bring in both demographic and geographic diverse tourists to Baker County.

\*Request for Direct Marketing of an event may be referred to Baker County Marketing Director— Timothy Bishop.

 **Application Process**

* All applications are to be received no earlier than 180 days and **no later than 60 days prior to the event date**.
* Grant awards will be funded within 30 days prior to the event.
* The applicant, or representative is required to present the grant request to the TLTC at their next scheduled monthly meeting. Meetings are typically held the third Thursday of each month.
* A presentation of the event results including a financial profit and loss statement and a rough breakdown of where event attendees traveled from as the results of the event will be presented to the TLTC within 90 days following the event. Failure to make a presentation will negatively impact the applicants’ eligibility for future grants.

Return your completed application to the following address:

**Baker County Administrative Services**

**Attn: Shelly Christensen**

**1995 Third Street**

**Baker City, OR 97814**

Name of Event or Activity: Federal ID #:

Business Address:

Mailing Address (if different):

City: State: Zip:

Contact Person: Phone: Email:

Additional Contact: Phone: Email:

Amount Requested: Date of Event:

Total event or activity budget: \_\_\_\_\_\_\_\_\_\_

Has the event been funded with a TLT grant in the last three years? \_\_\_\_\_

If yes, how will the funds be used differently? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Event Specific Questions**

Describe the benefits the event should bring to the vitality of Baker County Tourism & Economy: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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If this is an event, please provide:

* Estimated number of attendees: \_\_\_\_\_\_\_\_\_\_
* Estimated number of participants: \_\_\_\_\_\_\_\_\_\_
* Estimated number of overnight stays of attendees: \_\_\_\_\_\_\_\_\_\_

List leadership team and other support groups.

How will you measure the success of this event or activity?

Specify how the grant funds will be used, please be as specific as possible.

Include a detailed budget for the event and list all estimated sources of revenue and expenses. If a profit is anticipated, please list how the excess funds will be used. Also include any additional grant funding you expect to receive.

**Reminder, if your budget includes revenue from lodging/overnight accommodations you are responsible to comply with the Transient Lodging Tax Ordinance available on bakercounty.org**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **[ORGANIZATION] [PROJECT TITLE]** | | | | | |
| Please complete columns C&D for the grant application listing all income sources for your event or activity. Use columns F&G after the grant has been awarded to track actual budget for your after event report | | | | | |
| **INCOME** | | | | | |
|  | **BUDGET** | |  | **Actual** | |
| **Cash** | **In-Kind** | **Cash** | **In-Kind** |
| ***Baker County TLT  Tourism Grant*** |  |  |  |  |
| **OTHER INCOME** | | |  | |
| Sponsorships |  |  |  |  |
| Other Grants |  |  |  |  |
| Admission/ registration |  |  |  |  |
| Other |  |  |  |  |
| Other |  |  |  |  |
| **SUB TOTAL INCOME** |  |  |  |  |
| **TOTAL INCOME** |  | |  | |
|  | | | | | |
|
| **EXPENSES** | | | | | |
| Please complete columns C&D for the grant application listing all expenses for your event or activity. Use columns F&G after the grant has been awarded to track actual budget for your after event report | | | | | |
|  | **BUDGET** | |  | **Actual** | |
| **Cash** | **In-Kind** | **Cash** | **In-Kind** |
| Advertising 1 |  |  |  |  |
| Advertising 2 |  |  |  |  |
| Other |  |  |  |  |
| Other |  |  |  |  |
| Other |  |  |  |  |
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|  |  |  |  |  |
| **SUB TOTAL EXPENSES** |  |  |  |  |
| **TOTAL EXPENSES** |  | |  | |