2019 Application for Chelan County Lodging Tax Funds

Amount of Lodging Tax Requested: \$
Organization/Agency Name:
Federal Tax ID Number:
Event or Activity Name (if applicable):
Contact Name and Title:
Mailing Address:
Phone:
Email Address:
Check all service categories that apply to this application: Tourism Promotion/Marketing Operation of a Special Event/Festival designed to attract tourists Operation of a Tourism Promotion Agency Operation of a Tourism-Related Facility owned or operated or non-profit organization Operation and/or Capital Costs of a Tourism-Related Facility owned by a municipality
Check which one of the following applies to your agency: Non-Profit Public Agency For Profit Agency / Business
CERTIFICATION I am an authorized agent of the organization/agency applying for funding. I understand that: I am proposing a tourism-related service. If awarded, my organization intends to enter into a Municipal Services Contract with the County and provide liability insurance for the duration of the contract naming the County as an additional insured and in an amount determined by the County. The County funds may only be used for those costs actually incurred by my organization/agency. The County may require accounting documentation including but not limited to original invoices, payroll records, and other payment documentation. My agency will be required to submit a report documenting economic impact results in a format determined by the County.
Signature:Date
Printed or Typed Name:

1. Describe your tourism-related activity or event.

 \Box If an event, list the event name, date(s), and projected overall attendance.

□ Describe why tourists will travel to Chelan County to attend your event, activity/facility.

2. (Estimates in question #2 are required by State law)

As a direct result of your proposed tourism-related service, provide an estimate of:

a. Overall attendance at your proposed event/activity/facility:

b. Number of people who will travel more than 50 miles for your event/activity:

c. Of the people who travel more than 50 miles, the number of people who will travel from another country or state:

d. Of the people who travel more than 50 miles, the number of people who will stay overnight in Chelan County:

e. Of the people staying overnight, the number of people who will stay in PAID accommodations (hotel/motel/bed-breakfast) in Chelan County:

f. Number of paid lodging room nights resulting from your proposed event/activity/facility: (Example: 25 paid rooms on Friday and 50 paid rooms on Saturday = 75 paid lodging room nights)

The County must also require post event reporting. What methodology will you use to calculate the actual number of visitors? (For example, some entities may ask for zip codes on ticket sales, put up a map at your event for visitors to pinpoint their home, or would your event be able to be tracked by a partner hotel who offers a special rate?)

3. Describe the prior success of your event/activity/facility in attracting tourists:

4. Describe your target tourist audience (location, demographics, etc.):

5. Describe how you will promote your event/activity/facility to attract tourists:

6. Are you applying for Lodging Tax Funds from another community (yes or no)? If yes, list the other jurisdiction(s) and amount(s) requested:

7. What is the overall budget for your event/activity/facility? What percent of the budget are you requesting from Lodging Tax Funds?

NOTE: If you need to include additional documentation, when you click "Send" you will have the option to attach a file(s) using your email program (i.e. Gmail, Hotmail, Outlook, etc.)

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