

TOURISM DEVELOPMENT COUNCIL
REQUEST FOR FUNDS
FISCAL YEAR 2008-2009

PART I - INSTRUCTIONS AND DEFINITIONS

PURPOSE:

This document sets forth the guidelines and categories for requests for funds from Tourist Development Taxes. Applications will be accepted from organizations that will sponsor and promote tourism activities during fiscal year 2008-2009 within Seminole County that bring substantial numbers of visitors to the County.

AUTHORIZATION HISTORY:

- The Florida State Legislature enacted the Local Option Tourist Development Act (Section 125.0104, Florida Statutes) in response to the growing need of Florida counties to provide additional revenue sources for Tourist Development in an effort to stimulate the local economy. In response to this need, on October 4, 1988, the voters of Seminole County approved a two (2) percent Tourist Development Tax on transient rental accommodations. A Tourist Development Council was also created to assist the Seminole County Board of County Commissioners in planning ways in which to use the revenues received through the Tourist Development Tax, based on statutory guidelines. The tax was increased to three (3) percent effective January 1, 1993.

TIMETABLE FOR REVIEW:

- Applicants who wish to be considered for funding can download the application from the Seminole County Convention & Visitors Bureau web site (www.visitseminole.com) or call 407.665.2900.
- Applications must be received a minimum of 4 weeks prior to the next scheduled TDC meeting (Please refer to www.visitseminole.com to view meeting schedule). Applications may be mailed or hand delivered to Seminole County Convention & Visitors Bureau, 1230 Douglas Avenue, Suite 116, Longwood, Florida 32779.

For further information, please contact Sharon Sears, Executive Director (407.665.2901) or ssears@seminolecountyfl.gov.

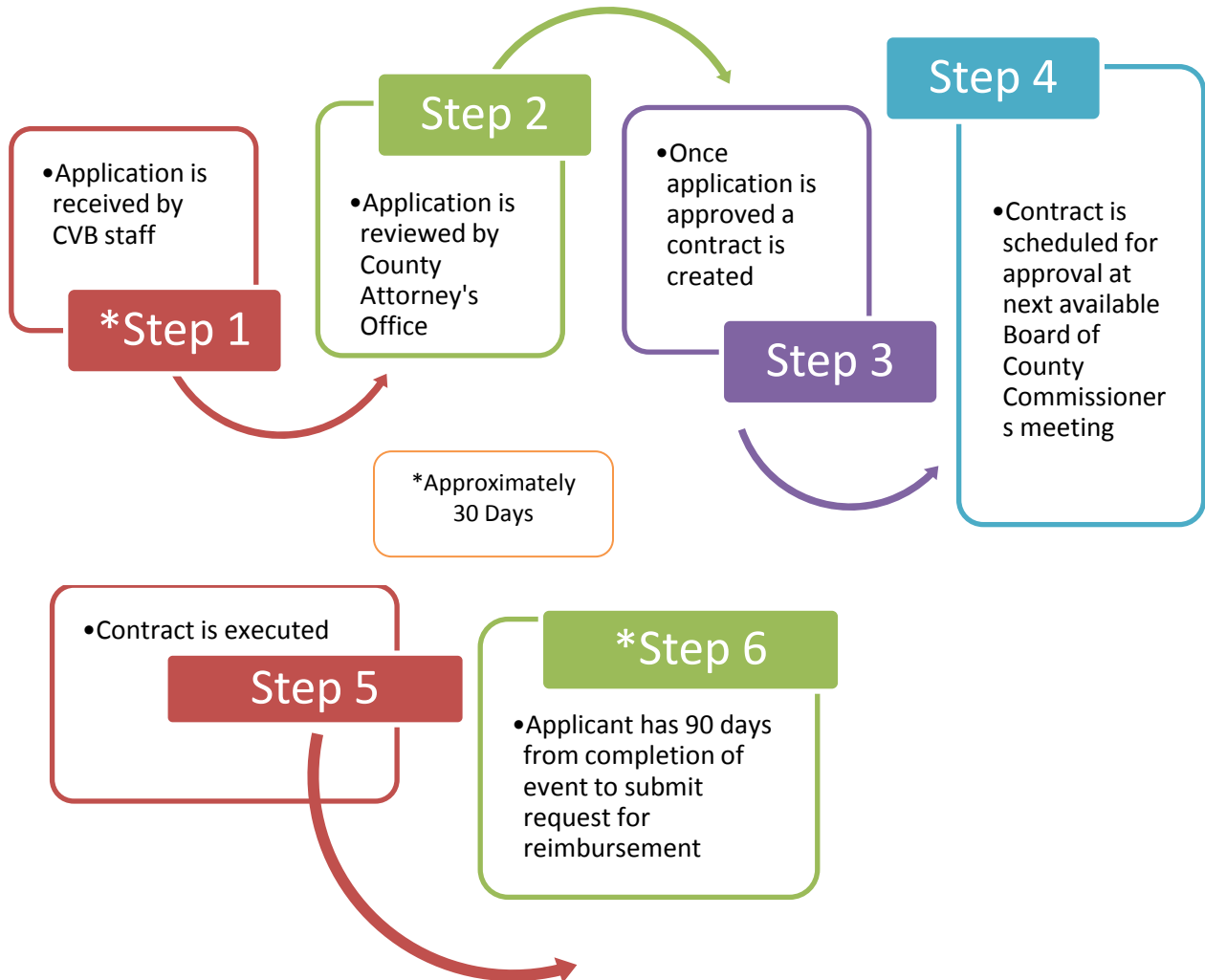
APPLICATION AND EVALUATION PROCEDURE:

Please read the following instructions carefully and contact the Tourism Development Office with any questions. Applicants are cautioned not to contact any member of the Seminole County Board of County Commissioners or Tourist Development Council (TDC) regarding their request. All contacts should be channeled through the Convention and Visitors Bureau Director's office.

- Staff will conduct a preliminary review of the application. An economic impact form showing estimated number of room nights, average room rate and total estimated direct economic impact must be submitted with the application. Failure to provide the form or incomplete forms will result in further delay. The form is available on www.visitseminole.com in MS Excel format.
- Please try to be as accurate as possible on the projected amount of room nights as reimbursement is dependent upon the availability of Tourist Development Tax funds and/or the number of CONFIRMED room nights associated with the event. See page four for the disbursement process.
- Incomplete applications will be returned.
- The application will be scheduled for TDC review and action at the next scheduled Tourist Development Council meeting. Meetings are held every other month on the second Thursday of the month. (Please refer to www.visitseminole.com for exact location and date.) Applicants are urged to present the application in person.
- Upon recommendation by the TDC, the County Attorney's Office will prepare a contract for final approval by the Board of County Commissioners. No events are authorized and no funds may be disbursed without approval by the Board of County Commissioners.
- Funding recommendations by the Tourist Development Council are subject to final budget approval and availability of funds.

For further information, please contact Sharon Sears, Executive Director (407.665.2901) or ssears@seminolecountyfl.gov.

APPLICATION AND EVALUATION PROCEDURE FLOW-CHART:



EVENT GUIDELINES

Applications must conform to the guidelines specified by the Tourist Development Council. Applications that do not conform to these guidelines will not be considered for funding. The funding limits are subject to final approval by the Tourist Development Council and Board of County Commissioners.

Sponsorships are available for major events staged in the County by organizations that attract large numbers of visitors from outside the County. An example would be national or international amateur sports events.

Consideration for funding is determined by the overall benefit to Seminole County Tourism. Special consideration will be given to events that span a minimum of two (2) days in length. The amount awarded will be determined by the following:

- Number of room nights to be generated by the event
- History of documented room nights (when available)
- Facilities/venues used
- Total economic impact (see attachment)
- Overall benefit to Seminole County tourism

The maximum allowable amount of any single sponsorship is \$25,000. Funding limits are subject to final approval by the Tourist Development Council and Board of County Commissioners.

Disbursement

Please note:

The applicant is responsible for documenting the number of room nights actually utilized per event at each Seminole County hotel. The applicant must have each hotel individually certify the actual number of rooms picked up by having the General Manager of the hotel to fill out the Room Night Pick Up Form (Exhibit D). All Room Night Pickup Forms must be submitted with the request for funds form as outlined in your contract **within 90 days of the conclusion of the event**. Your request for reimbursement will be considered incomplete until all of the following forms are submitted to the Seminole County CVB.

- Exhibit A- Event Application
- Exhibit B- Request for Funds Form
- Exhibit C- Post Event Economic Impact Analysis
- Exhibit D- Room Night Pickup Forms

The Seminole County CVB reserves the right to unilaterally reduce the maximum amount of any grant awarded, should the applicant's room night guarantee (page 11) not be satisfied.

CRITERIA FOR EVALUATION OF APPLICATIONS

Applications will be evaluated on four (4) categories.

- I. **COMMITMENT TO THE EXPANSION OF TOURISM IN SEMINOLE COUNTY**
 - A. Evidence that the event: serves to attract out-of-county visitors generating hotel/motel/campground rentals; will be marketed to the fullest extent possible in an effective and efficient manner; demonstrates a willingness of the organizers to work with the tourism industry; commitment to develop other funding sources in subsequent years.

- II. **SOUNDNESS OF PROPOSED EVENT**
 - A. The extent to which the event: has clearly identified objectives; has assigned responsibilities and accountability; has a realistic timetable for implementation; has additional funding sources available that will be utilized; will accomplish its stated objectives.

- III. **STABILITY AND MANAGEMENT CAPACITY**
 - A. A proven record or demonstrated capacities of the organization to develop resources, effectively plan, organize and implement the proposed event.
 - B. The organization has a successful history of service in, and to, Seminole County Tourism.
 - C. Ability of the organization to administer public grants and to prepare and deliver the necessary progress reports to the Tourist Development Council.

- IV. **QUALITY AND UNIQUENESS OF PROPOSED EVENT**
 - A. Extent to which the activity provides a program for Seminole County visitors and its residents, of significant merit and that, without such assistance, would not take place in the County.

USE OF TOURISM DEVELOPMENT FUNDS

Florida State Statutes 125.0104 section 5(A) 2 states that Tourism funds must be used to promote and advertise tourism in the State of Florida and nationally and internationally; however, if tax revenues are expended for an activity, service, venue, or event, the activity, service, venue, or event shall have as one of its main purposes the attraction of tourists as evidenced by the promotion of the activity, service, venue, or event to tourists.

NOTICE: If your event is approved for funding, all collateral material and advertisements must list Seminole County as one of the event sponsors. **Also, the CVB logo and website must be visible on all printed materials.**

AUTHORIZED USES OF FUNDS

The following are examples of how Tourist Development Funds may be used to promote tourism for Seminole County.

Promotional Expense

1. Promotional expenses in conjunction with an event to increase participation and bring visitors to Seminole County. Examples are: printing and distribution of promotional pieces prior to the event.
2. Advertising and publicity of an event outside of the Greater Orlando area to increase participation, attendance and awareness of the event and generate hotel room nights.
3. Promote Seminole County as the Title Sponsor of the event. The event organizer must insert "Seminole County" within the actual name of the event. The Title Sponsor must be placed on all advertising material produced to promote the event outside of Seminole County. Applicants could be eligible for consideration of premium title sponsor advertising upon review by the TDC. The TDC will review title sponsor applications for the event based upon the following categories:
 - Number of room nights to be generated by the event
 - Level of local, regional, and/ or national media coverage event will bring to Seminole County
 - Time of year event will take place-Does the event take place in a month of low economic activity?
 - Does this event have the ability to become an annualized event in Seminole County? If so, could this event lead to a bigger or higher profile event in future years?

Operational Expense

Operational expenses are only allowable when they logically and defensibly can be attributed purely to the development/production of the event that specifically targets and promotes out-of-town visitors to Seminole County.

1. Bid Fee
2. In Kind Services such as facility rentals for events that take place at publicly owned and operated facilities and/or events that take place at facilities that are operated by not-for-profit organizations and open to the public.

Please be advised that Seminole County policy requires the submission of original invoices and copies of canceled checks with all requests for both operational and promotional expense reimbursement. Reimbursement will only be made if original invoices and copies of canceled checks are provided. There are no exceptions.

UNAUTHORIZED USES OF FUNDS

The following are examples of non-allowable expenses of Tourism Development Tax Funds.

FUNDS MAY NOT BE USED FOR:

1. Prize money, scholarships, awards, plaques, or certificates.
2. Travel expenses.
3. Private entertainment, food, and beverages.
4. Annual operating expenditures not directly related to the event or event.
5. Legal, medical, engineering, accounting, auditing, planning, feasibility studies or other consulting services.
6. Salaries.
7. Real property or capital improvements to privately owned facilities.
8. Tangible personal property including but not limited to office furnishings or equipment, permanent collections, or individual pieces of art.
9. Interest or reduction of deficits and loans.
10. Expenses incurred or obligated prior to or after the grant event period.
11. Advertising and promotional materials distributed at the event site or after event.

APPLICATION FOR FUNDS
GENERAL INSTRUCTION

THE FOLLOWING QUESTIONS MUST BE ANSWERED IN FULL.

I. GENERAL INFORMATION

To assist us in evaluating the impact of your event on Seminole County and to better understand what support you are requesting, the following questions must be answered completely. Please do not skip any information which applies to your event.

Please contact Sharon Sears, Executive Director at 407-665-2901 with any questions.

Copies of the following items are required and should be attached to your application:

- () Charter, Articles of Incorporation, By-laws
- () Minutes of meeting authorizing officers to apply for these tourism tax funds
- () IRS Determination Letter of non-profit status
- () List of current Officers and Board members indicating terms and salaries.
- () Organizational Chart
- () Copy of financial statement of your most recent fiscal year.
- () Proof of Liability Insurance

PART II APPLICATION FOR FUNDS
TOURIST DEVELOPMENT SPONSORSHIP
FY 2008-09

(1) NAME OF ORGANIZATION [Click here to enter text.](#)

(2) NAME OF EVENT [Click here to enter text.](#)

(3) CONTACT PERSON [Click here to enter text.](#)

(4) CONTACT PERSON E-MAIL [Click here to enter text.](#)

(5) COMPLETE ADDRESS OF ORGANIZATION:

STREET [Click here to enter text.](#)

CITY [Click here to enter text.](#) ST [Click here to enter text.](#) ZIP [Click here to enter text.](#)

PHONE: [Click here to enter text.](#) CELL: [Click here to enter text.](#) FAX: [Click here to enter text.](#)

(6) ORGANIZATION'S CHIEF OFFICIAL: [Click here to enter text.](#)

TITLE: [Click here to enter text.](#) Address if different from above: [Click here to enter text.](#)

PHONE: . CELL: [Click here to enter text.](#) FAX: [Click here to enter text.](#)

(7) INTENDED USE OF FUNDS: (Refer to Pages 6-7 – Authorized/Unauthorized Uses of Funds [Click here to enter text.](#)

(8) AMOUNT REQUESTED \$ [Click here to enter text.](#)

(9) IF ENTIRE REQUEST CANNOT BE FUNDED, CAN THE EVENT BE RESTRUCTURED FOR LESS FUNDING? YES NO

II DETAILS ON YOUR ORGANIZATION:

In narrative form please describe your organization in the following areas. **Use a separate sheet to complete these questions in detail.**

- (1) What are your organization's goals and objectives?
[Click here to enter text.](#)
- (2) What services does your organization provide?
[Click here to enter text.](#)
- (3) How will your organization monitor expenditure of funds?
[Click here to enter text.](#)
- (4) How will your event bring additional visitors and hotel room nights to Seminole County?
[Click here to enter text.](#)
- (5) What is your organization's experience in managing sponsorships and grants?
[Click here to enter text.](#)

III EVENT INFORMATION (Use additional sheets where necessary.)

- (1) EVENT NAME: [Click here to enter text.](#)
- (2) TYPE OF EVENT: [Click here to enter text.](#)
- (3) DATE OF EVENT: [Click here to enter text.](#)

- (4) NUMBER OF DAYS: [Click here to enter text.](#) HOURS: FROM: [Click here to enter text.](#) TO: [Click here to enter text.](#)

- (5) EVENT PROMOTER (IF OTHER THAN YOUR ORGANIZATION)
 - NAME OF PROMOTER [Click here to enter text.](#)
 - COMPANY NAME [Click here to enter text.](#)
 - ADDRESS: [Click here to enter text.](#)
 - PHONE and FAX [Click here to enter text.](#)

- (6) PROJECTED NUMBER OF LOCAL PARTICIPANTS, GUESTS AND MEDIA [Click here to enter text.](#)

- (7) PROJECTED NUMBER OF OUT-OF-COUNTY PARTICIPANTS: [Click here to enter text.](#)
AVERAGE NUMBER OF DAYS STAY IN SEMINOLE COUNTY: [Click here to enter text.](#)

- (8) PROJECTED NUMBER OF OUT-OF-COUNTY GUESTS OF PARTICIPANTS: [Click here to enter text.](#)
AVERAGE NUMBER OF DAYS STAY IN SEMINOLE COUNTY: [Click here to enter text.](#)

- (9) PROJECTED NUMBER OF OUT-OF-COUNTY MEDIA PERSONS: [Click here to enter text.](#)
AVERAGE NUMBER OF DAYS STAY IN SEMINOLE COUNTY: [Click here to enter text.](#)

- (10) PROVIDE THE ESTIMATED DIRECT ECONOMIC IMPACT ON SEMINOLE COUNTY FROM YOUR EVENT (**The Eco Impact form for the application can be found on the website**): [Click here to enter text.](#)

- (11) WHAT IS THE **GUARANTEED MINIMUM** NUMBER OF ROOM NIGHTS YOUR EVENT WILL BRING TO SEMINOLE COUNTY? [Click here to enter text.](#)
Note: This number is the minimum number of rooms that must be captured by the event and documented by submitting the Room Night Pick-Up Form (Exhibit D) within 90 days of the conclusion of the event. Failure to meet this minimum room night guarantee, the total amount of grant disbursement will be decided by the Seminole County CVB.

- (12) PROVIDE A LIST OF OTHER EVENT SPONSORS AND THE AMOUNT(S) OF THEIR SPONSORSHIPS. [Click here to enter text.](#)

- (13) PROVIDE THE LOCATION, CONTACT NAME AND PHONE NUMBER FOR THE EVENT FOR THE LAST THREE YEARS. [Click here to enter text.](#)

- (14) PLEASE PROVIDE DETAILS OF HOW THE EVENT WILL WORK. [Click here to enter text.](#)

IV SPORTING EVENT (If Applicable)

- (1) NAME OF SPORT/EVENT: [Click here to enter text.](#)
- (2) LOCATION OF EVENT: (IF MORE THAN ONE, LIST ON SEPARATE SHEET.)
[Click here to enter text.](#)
- (3) TOTAL NUMBER OF FIELDS NEEDED: [Click here to enter text.](#)
- (4) TOTAL NUMBER OF FIELDS NEEDED PER DAY: [Click here to enter text.](#)
- (5) NUMBER OF LIGHTED FIELDS REQUIRED: [Click here to enter text.](#)
- (6) PROVIDE FIELD USE TIMES BY DAY: [Click here to enter text.](#)
- (6) SPECIAL FIELD REQUIREMENTS (PLEASE SPECIFY): [Click here to enter text.](#)

V OTHER OUTDOOR EVENT:

- (1) LOCATION AND SIZE OF EVENT VENUE: [Click here to enter text.](#)
- (2) SPECIAL SITE REQUIREMENTS: [Click here to enter text.](#)

EVENT BUDGET SUMMARY

INCOME SOURCES:

TOURIST DEVELOPMENT TAX REQUEST \$Click here to enter text.

ADDITIONAL FUNDING SOURCES (Seminole County cannot be sole source.)

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$ Click here to enter text.

Click here to enter text.\$ Click here to enter text.

TOTAL ADDITIONAL FUNDS \$ Click here to enter text.

OTHER INCOME SOURCES

Click here to enter text. \$ Click here to enter text.

Click here to enter text.\$ Click here to enter text.

Click here to enter text.\$ Click here to enter text.

Click here to enter text.\$ Click here to enter text.

Click here to enter text.\$ Click here to enter text.

Click here to enter text.\$ Click here to enter text.

Click here to enter text.\$ Click here to enter text.

TOTAL OTHER INCOME \$ Click here to enter text.

TOTAL INCOME ALL SOURCES \$ Click here to enter text.

EVENT EXPENSES:

Provide an itemized summary indicating the intended use of TDC funds. Please be as explicit as possible, including intended publications, promotional materials, etc. and how much money will be expended (tentatively) for each category. Use additional sheets if necessary.

Intended Utilization of Tourist Tax Funds

(Please refer to authorized and unauthorized uses on page 6-7)

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Total Tourism Funds:

\$Click here to enter text.

Other Event Expenses

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Click here to enter text.\$Click here to enter text.

Total Other Event Expenses

\$Click here to enter text.

TOTAL EVENT EXPENSES

\$Click here to enter text.

CERTIFICATION

I have reviewed this Application for Funds from the Tourist Development Council for FY 2008-09. I am in full agreement with the information contained herein. To the best of my knowledge, the information contained in this Application and its attachments is accurate and complete.

Chief Corporate Officer

Date

Seal

Corporation Secretary

Date