

**OCALA/MARION COUNTY  
VISITORS  
AND  
CONVENTION BUREAU**

**Tourism Enhancement Grant Program  
Application Packet  
Revision 3  
Fiscal Year 2009-2010**

**Direct All Correspondence To:**

**Ocala/Marion County Visitors and Convention Bureau  
409 SE Fort King Street  
Ocala, FL 34471  
(352) 291-9169**

## AMENDMENT RECORD

Future amendments to the grant application will be documented here (including the date of the change).

<b>Amendment No.</b>	<b>Date of Issue Amended</b>	<b>By Date Amended</b>
<b>1</b>	<b>June 21, 2005</b>	<b>March 20, 2007</b>
<b>2</b>	<b>March 20, 2007</b>	<b>July 1, 2008</b>
<b>3</b>	<b>July 1, 2008</b>	<b>July 7, 2009</b>

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## **SECTION 1 – INTRODUCTION**

On June 21, 2005, the Marion County Board of County Commissioners formally adopted the Tourism Enhancement Grant Program in an effort to support local projects and special events that promote tourism. The program makes funds available for qualified organizations. This packet contains the information necessary for organizations to apply for grant funding.

### **SECTION 1.1 – DEFINITION OF TERMS:**

For the purpose of this application, the following terms are defined as:

ACCOMMODATORS – Hotel, Motel, Bed & Breakfast, Campground, Resort, Vacation Rental, etc...

BCC – Board of County Commissioners.

COUNTY - Marion County Government.

EVENT – The special event for which grant funds are being requested.

TDC – Marion County Tourist Development Council.

TDC CHAIRPERSON - Tourist Development Council Chairperson.

GRANTEE – Organization receiving the grant funds.

PROJECT – Tourism project for which grant funds are being requested.

O/MC VCB – Ocala/Marion County Visitors and Convention Bureau.

TDC MARKETING COMMITTEE – Tourist Development Council Marketing Committee.

### **SECTION 1.2 – SUBMISSION REQUIREMENTS:**

Upon completion, please submit (14) original copies of this entire Application Packet to:

Ocala/Marion County Visitors and Convention Bureau  
409 SE Fort King Street  
Ocala, FL 34471

## **SECTION 2 – EVENT/PROJECT OBJECTIVES:**

Events or projects funded by the Tourism Enhancement Grant must meet the objectives outlined by the TDC, which are listed below. All activities funded by the Tourism Enhancement Grant shall credit the Ocala/Marion County Visitors and Convention Bureau. Printed materials must include the VCB logo or logo type and the following tagline: “This event/organization is funded in part by the Ocala/Marion County Visitors and Convention Bureau” and [www.OcalaMarion.com](http://www.OcalaMarion.com). Grant recipients should refer to the TDC Grant Standards & Usage Manual for compliance. Failure to comply may jeopardize current and future funding. The TDC is ONLY a financial contributor to the event and not a promoter or co-sponsor and will NOT be responsible for any debt incurred for such event. The maximum allowable TDC grant award for any single event or project will not exceed \$10,000.00. Grantee must return any unused funds and/or any funds used for expenditures not authorized by the TDC.

1. Events/Projects must create paid lodging and economic activity for Marion County. Additionally, events must be held in Marion County. Exceptions will be reviewed on a case by case basis. Wherever “room nights” are referenced, room night revenue must be recorded. A form for accommodation providers to sign, in order to verify lodging nights is included and it is the responsibility of the applicant to obtain documentation from accommodators.
2. Events/Projects should enhance Marion County’s appeal to visitors.
3. Events/Projects should support the TDC mission to “Promote Tourism for Marion County.”
4. Grant recipient organizations that have received three (3) grants in the past will be required to provide documentation (Revenue and Room Night Certification Form) that funding has contributed to an increase in overnight stays in Marion County. The TDC will actively avoid becoming a perpetual funding source for any event.

## **SECTION 2.1 – ELIGIBLE USE OF FUNDS:**

1. Pre-event marketing: (Print, Radio, and Television Advertisements; Outdoor Signage/Banners; Poster/Flyers/Brochures; Artwork/Graphic Design; Media Events, Direct Mail; and/or Online Media
2. Facility Rental
3. Security (Police, Sheriff Deputies, Ushers, Marshalls)
4. Fees to Sanctioning Bodies
5. Maintenance, Janitorial and other Clean-up
6. Officials' Fees
7. Officials' Housing
8. Awards to Participants
9. Timing and Scoring Equipment, Supplies and Fees
10. Rental items: Tents, Toilets, Barricades, etc...
11. Sports specific equipment (purchase or rental)
12. Volunteer and Officials' Incentives
13. Medical and athletic training fees and supplies
14. Transportation Costs
15. Fees for Contract Labor
16. Printing: Results, Programs, Heat Sheets, etc...
17. Other expenditures consistent with Florida statutes and TDC objectives may be considered.

## **SECTION 2.2 – INELIGIBLE USE OF FUNDS:**

Grant funds **MAY NOT** be used for:

1. Annual operating expenditures, to include property taxes.
2. Professional legal, medical, engineering, accounting, auditing, consultant, or tax service.
3. Real property.
4. Interest or reduction of deficits or loans.
5. Prize money and/or scholarships.
6. Receptions or social functions other than those specifically designed for pre-event media promotional purposes.
7. Sales tax.
8. Website design not specific to the event.
9. Ongoing or annual facility maintenance.
10. Docents and/or employee wages.
11. Other expenditures not consistent with Florida statutes or TDC objectives.

### **SECTION 3 – SELECTION AND NOTIFICATION PROCESS:**

The TDC Marketing Committee will review all applications for eligibility and merit. All applicants must complete the application form provided. If the required application is not used or the application is received after the deadline, it will not be considered.

Recommendations by the TDC Marketing Committee will be sent to the TDC for further review and approval. The Board of County Commissioners will have final approval.

The TDC will notify approved applicants of their selection for funding and conditions required by the TDC. Approved applicants will receive:

1. Letter from the TDC notifying them of the amount awarded and requirements to claim and utilize funds. **Grant funds cannot be obligated or expended before Board of County Commission approval is received.**
2. Two copies of the Grant Agreement to sign and return to the TDC. One copy will be returned to the GRANTEE and the other copy will be placed in the Ocala/Marion County Visitors & Convention Bureau's official file.

Fifty percent (50%) of the grant money will be paid upon the award of the grant. The remainder will be paid after the successful completion of the event/project and when the grantee has complied with all grant requirements to the O/MC VCB within 60 days after the event has ended. When requesting the remaining 50% balance, the grantee must provide the following documentation: actual attendance figures, actual income and expenses, room night verification, invoices and copies of advertising purchased with TDC funds, including tear sheets and proof of performance typical for all media buys. The Committee may elect not to award the full 50% balance if applicant has failed to comply with grant requirements. If an event/project loses its' viability (see Section 3.1), the TDC may decide to terminate funding.

Recipients of TDC grants agree to keep records of all transactions related to this grant and the use of grant funds. All award receipts and expenditures are subject to audit by the TDC or Marion County (or their designee) at the Grantee's office during normal business hours.

#### **SECTION 3.1 - PROJECT LOSES VIABILITY PRIOR TO CONTRACT:**

Once the Grant Agreement is signed by the Grantee, if an event/project would lose its viability; e.g., the organization disbands or goes out of business or an event does not take place, the Tourist Development Council Chairperson will make the initial decision on whether funding for the project should be terminated. If the TDC Chairperson decides that such termination is appropriate, then the matter shall proceed to the attention of the TDC. If the TDC decides to terminate the funding for the project, then the funds will revert back to the grant budget. The TDC Chairperson can also take emergency action to temporarily terminate a project, prior to the TDC approval, under certain circumstances, if the action is necessary to protect the County's interest.

**SECTION 4 – GRANT APPLICATION:**

Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Event/Project Name: \_\_\_\_\_ Amount Requested: \$ \_\_\_\_\_

Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Location: \_\_\_\_\_ Address: \_\_\_\_\_

Has your organization applied for TDC grant funds in the past? \_\_\_\_ yes \_\_\_\_ no

If yes, list all dates and amount of grants awarded: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Event/Project  
Description: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Event/Project Phone: \_\_\_\_\_ Website: \_\_\_\_\_

Admission Cost: \_\_\_\_\_ Previous Year's Attendance: \_\_\_\_\_

Anticipated Attendance for this Event/Project: \_\_\_\_\_

Organization's Chief Officer: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Signature of Chief Officer: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 4.1 – TOURISM ENHANCEMENT GRANT  
EVENT/PROJECT SCOPE OF WORK:**

(Attach additional pages if needed)

Event/Project Name: \_\_\_\_\_

1. State the goals and objectives for the special event/project.

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2. Describe how this event/project meets the objectives set forth in Section 2.

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3. Describe how the use of Tourism Enhancement Grants funds will be monitored.

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4. Describe the distribution plan for any promotional collateral, if applicable.

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5. Describe how profits made, if any, from the event/project will be distributed.

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**SECTION 4.1 CONTINUED – TOURISM ENHANCEMENT GRANT  
EVENT/PROJECT SCOPE OF WORK:**

6. How many room nights do you estimate will be generated from this event/project?  
(Explain how the number of room nights was calculated; i.e., 45 hotel rooms booked for 7  
nights are equal to 315 room nights.)

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7. Of the estimated room nights above, how many will be paid and how many will be  
complimentary room nights?

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8. If you have selected a host hotel or entered into a contract for a block of rooms, name  
the hotel(s) as well as any other verifiable lodging; e.g., campgrounds and RV parks.

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9. Other Information: (Optional) \_\_\_\_\_

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**SECTION 4.2 – PROJECTED GRANT BUDGET OUTLINE:**

*\* List Only Usage of TDC Grant Funds - Attach additional pages if needed.*

Grant Funds Requested \$ \_\_\_\_\_

ACTIVITY/VENDOR	AMOUNT OR PERCENTAGE	TOTAL
Pre-event marketing		
Facility Rental		
Security		
Fees to Sanctioning Bodies		
Maintenance, Janitorial and other Clean-up		
Officials' Fees		
Officials' Housing		
Awards to Participants		
Timing & Scoring Equipment, Supplies and Fees		
Rental items: Tents, Toilets, Barricades, etc...		
Sports specific equipment (purchase or rental)		
Volunteer and Officials' incentives		
Medical and athletic training fees and supplies		
Transportation costs		
Fees for Meet Coordinator and/or other key Officials		
Printing: Results, Programs, Heat Sheets, etc...		
Other expenditures consistent with Florida statutes and TDC objectives may be considered.		
<b>TOTAL</b>		

## SECTION 4.3 – EVENT/PROJECT BUDGET OUTLINE:

EVENT/PROJECT NAME \_\_\_\_\_

	List Previous Year's Revenue & Expenses	List Present Year's Projected Revenues & Expenses
<b><u>LIST ALL REVENUE</u></b>		
Admissions	_____	_____
Concessions	_____	_____
Sponsorships	_____	_____
Booth Space	_____	_____
Advertising Revenue	_____	_____
Sale of Promotional Items	_____	_____
TDC Grant	_____	_____
Other: _____	_____	_____
_____	_____	_____
<b>Total Revenue</b>	<b>\$ _____</b>	<b>\$ _____</b>
<b><u>LIST ALL EXPENSES</u></b>		
Administrative	_____	_____
Advertising/Promotions	_____	_____
Printing	_____	_____
Promotional Items	_____	_____
Concessions	_____	_____
Awards	_____	_____
Travel	_____	_____
Talent	_____	_____
Other: _____	_____	_____
_____	_____	_____
<b>Total Expenses</b>	<b>\$ _____</b>	<b>\$ _____</b>
<b>NET PROFIT/LOSS</b>	<b>\$ _____</b>	<b>\$ _____</b>

**SECTION 4.4 – REVENUE & ROOM NIGHT CERTIFICATION FORM**



Attention: General Manager and/or Director of Sales

The purpose of this form is to certify the number of hotel/motel room nights in Marion County attributable to this event. The Tourist Development Council reserves the right to unilaterally reduce the maximum amount of any grant awarded should the grantee’s room night guarantee not be satisfied or documented with this Room Night & Revenue Certification Form.

Hotel/Location: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

	<b>TRACKED ROOM NIGHTS</b>					
GROUP NAME						
EVENT NAME						
EVENT DATES						
DATE						
<b>PAID</b> ROOM NIGHTS						
COMP'D ROOM NIGHTS						

If you know that additional rooms were used but NOT formally tracked, please use the line below to estimate what those additional room nights were:

\_\_\_\_\_

Hotel Representative

Signature: \_\_\_\_\_  
 I certify the organization/event listed above consumed the reported room nights.

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Your cooperation in completing this form is greatly appreciated. For additional information please contact Ann Sternal, Executive Director, Ocala/Marion County Visitors & Convention Bureau at (352) 873-1368.