



**CITY OF TALLAHASSEE COMMUNITY REDEVELOPMENT
AGENCY DOWNTOWN DISTRICT PROMOTIONAL/SPECIAL
EVENTS GRANT APPLICATION FY2018**

NOTE: PREFERENCE GIVEN TO ELECTRONIC SUBMITTALS

SECTION I – GENERAL INFORMATION

Date _____

Official Name of Organization _____

Organization's Address _____

Contact Person/Title _____

Phone Number _____ Email Address _____

Event Name _____

Event Location (address) _____

Event Date and Time _____

Threshold Question A

Is this location within the Downtown Community Redevelopment Area?

Yes___ No___

If the answer above is No, please do not proceed with completing this application.

Threshold Question

Threshold Question B

Will the event be open to the public? Yes___ No ___

Unless your event will be open to the public, it is NOT eligible for CRA funding under this program. **Threshold Question**

Item C

Budget for Event* _____ Amount Requested from CRA _____

**Preference will be given to those applications submitted electronically. File Size NOT to exceed 10MB
Send application and supporting documents to: CRA@talgov.com . A confirmation e-Mail receipt
will be forwarded within 48 hours. You must be sure, you submit by the applicable deadline AND
that a confirmation of your submittal is received.**

Effective May 25, 2017

SECTION III – EVENT COORDINATION

3. Please list the community groups and/or businesses located within the redevelopment area where the event will be held, which you have received support letters from and have assisted in the coordination of this event. Examples of these groups include, but are not limited to, the Capital City Chamber of Commerce, the Greater Frenchtown Front Porch, and the various neighborhood organizations. Please list the groups and their contact information and attach letters of support.

Maximum 5 points: 1 point for each support letter.

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

4. a. How many people are expected to attend the event? **Maximum 5 points**

Less than 200 _____
201 – 500 _____
More than 501 _____

- b. How did you determine this number for expected attendance?

5. Will vendors pay to participate in the event? Yes _____ No _____

List participating vendors:
If additional space is needed, please use a separate sheet and attach to the application.

Name and Contact Information

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

Maximum 5 Points

SECTION IV – EVENT BUDGET

- 6. Please complete the budget form below with your estimated/anticipated budget expenses and estimated income, including income from other agencies and sponsors. Make sure to list anticipated expenses that are being paid with CRA funds under estimated expenses and CRA expenses. Any profit gained from the event should be explained in terms of its use; event sustainability, charity or otherwise.

If your application is awarded a grant, the grant award will be based on the estimated budget submitted with your application. Please be attentive to your estimated expenses and income.

The actual expenses and income will be completed once your event has ended and the post-event report is submitted.

Note: Total estimated expenses and income should balance. If there is a profit, explain below how the profit/revenue will be used - event sustainability, charity or otherwise. Also explain any in-kind services/donations and volunteer services, if any. Attach additional sheets if needed.

Maximum 20 points

Estimated Event Budget

Expenses

Income

	Estimated	CRA
Rentals		
Facilities		
Equipment (Audio/Visual)		
Portalets		
Tables and chairs		
Totals	\$0.00	\$0.00
Publicity/Marketing		
Graphics work		
Photocopying/Printing		
Ad - TV, Radio, News		
Postage		
Social Media		
Totals	\$0.00	\$0.00
Refreshments		
Food		
Drinks		
Totals	\$0.00	\$0.00
Entertainment		
Performers		
Speakers		
Kids Entertainment		
Other		
Totals	\$0.00	\$0.00
Miscellaneous		
Permit(s)/Film License		
Security		
Gen. Liability Insurance		
Technical Support		
Supplies (please explain)		
Totals	\$0.00	\$0.00
Total Expenses	\$0.00	\$0.00
	Estimated	CRA

	Estimated
Admissions	
Adults	
Children	
Other	
Totals	\$0.00
Exhibitors/Vendors	
Large Booth	
Medium Booth	
Small Booth	
Totals	\$0.00
Sale of Items	
Totals	\$0.00
Co-Sponsors/Partners	
Totals	\$0.00
Grant Income	
CRA	
Totals	\$0.00
In-Kind Donations/Services	
Totals	\$0.00
Total Income	\$0.00
	Estimated

7. From the budget form attached, what percentage of the overall event budget is being requested from the CRA and other public agencies/organizations such as the City of Tallahassee, the Leon County Tourist Development Council (TDC) or Council on Cultural and Arts (COCA)?

_____ % **Maximum 15 points**

8. From the budget form attached, what percentage of the overall budget is being funded by private sponsors/organizations including in-kinds donations and services and the applicant's contribution?

_____ % **Maximum 15 points**

9. From the budget form attached, what percentage of the overall budget is being funded by the applicant?

_____ % **No points assigned**

10. Has this organization or this event received CRA funding in the past? If so, how many years have the organization or event received CRA funds?

CRA Funding Received:

- None _____
- 1 year _____
- 2 years _____
- 3 years _____
- 4 years _____
- 5 years _____
- 6+ years _____

Maximum 5 points

11. Describe the plans for making this event self-sustaining in the future and how the CRA funds will aid in this effort. If additional space is needed, please use a separate sheet and attach to the application.

Maximum 5 points

SECTION V – CERTIFICATION AND COMPLIANCE STATEMENT

We hereby certify that the information contained in this application is true and correct to the best of my knowledge and that I have read the Program Guidelines of the City of Tallahassee Community Redevelopment Agency Promotional and Special Event Grant Program and will abide by all legal, financial, and reporting requirements as a condition of receiving grant funds from the CRA. **Threshold Item**

The Tallahassee CRA requires two signatures from organization officers that have been given the authority to sign on behalf of the organization. Please provide documentation (Articles of Incorporation, By-Laws or approved minutes from meetings) highlighting where the officers below have been given signature authority.

I understand non-submittal of the required Promotional and Special Event Grant Program documents indicated on Page 9, Checklist, of the application will cause the application to be ineligible for scoring.

I further understand that there is a *minimum* score of at least 50 points to be considered eligible for funding. Applications scoring less than 50 points will not be eligible for funding consideration.

Signature of Organization’s Officer: _____ Date ___/___/17

Title of Officer: _____

Print Name: _____

Signature of Organization’s Officer: _____ Date ___/___/17

Title of Officer: _____

Print Name: _____

SECTION V – APPLICATION PACKAGE CHECKLIST

Please verify the following items are included with your submittal to be ineligible for scoring.

- _____ Complete Application
- _____ Complete Budget – including all estimated expenses, anticipated income (including in-kind donations), and please be sure to specify expenses in which you are requesting CRA funds.
- _____ Two signatures from the organization’s officers that have been given the authority to sign on behalf of the organization:
 - a copy of your By-Laws or approved minutes indicating the officers’ authorization to represent the non-profit organization.
- _____ Documentation indicating your active non-profit status which can be from any of the following forms:
 - a copy of your non-profit status letter from the U.S Department of Treasury (IRS) *or*
 - a copy of your Consumer Exemption Certificate from the Florida Department of Revenue *or*
 - a copy of your Articles of Incorporation from the Florida Department of State stating that the organization is non-profit.
- _____ Emailed application with file size less than 10MB. **Maximum 5 points**
- _____ Hard copies of application, submit 1 original and 3 copies