



**CITY OF TALLAHASSEE COMMUNITY REDEVELOPMENT AGENCY  
GREATER FRENCHTOWN/SOUTHSIDE DISTRICT  
PROMOTIONAL/SPECIAL EVENTS GRANT APPLICATION  
FY2019**

**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 Greater Frenchtown/Southside Community Redevelopment Area?

Yes\_\_\_ No\_\_\_

If the answer above is No, you are not eligible for CRA funding under this program, 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 \_\_\_\_\_

**Please submit 1 original and 3 copies of the application to 300 S. Adams Street,  
Tallahassee, FL 32301**





**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**



## Estimated Event Budget

### Expenses

### Income

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

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

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?

Organizations or events who have received funding for more than five (5) years shall have requested funding amount reduced by 50% in year 6 and are no longer eligible for funding after year 6.

**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**

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**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 (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, Application Package 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 \_\_\_/\_\_\_/\_\_\_

Title of Officer: \_\_\_\_\_

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

Signature of Organization's Officer: \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

Title of Officer: \_\_\_\_\_

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



## SECTION V – APPLICATION PACKAGE CHECKLIST

**Please verify the following items are included with your submittal to be eligible 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.
- \_\_\_\_\_ Hard copies of application, submit 1 original and 4 copies