

HOTEL OCCUPANCY TAX
PROGRAM YEAR 2018
APPLICATION

MUST BE TYPED

DELIVER TO:

City of Denton Attn: Randee Klingele 215 E. McKinney St. Denton, TX 76201

COMILETE ALI	LIOATIONO ARE DOL.	TRIDAT, MAT 13, 2017 3.00 F.M.	
Organization Name:			
Name of Event:			
Website Address:			
Mailing Address:			
Physical Address:			
Telephone #:		Fax #:	
Primary Contact Name: (Project Director)			
Mailing Address:			
Telephone #:		Fax #:	
Email Address:			
Secondary Contact Name: (Local Board Chairman)			
Mailing Address:			
Telephone #:		Fax #:	
Email Address:			

INCOMPLETE APPLICATIONS WILL NOT BE FORWARDED TO THE COMMITTEE

	an "X" next to the category or categories that your organization is requesting in the attached budget request.						
	Advertising 351.101 (a) 3						
	Conducting solicitation or promotional programs that encourage tourists and						
	delegates to come to the City of Denton.						
	Arts 351.101 (a) 4						
	Providing encouragement, promotion, improvement, and application of the						
	arts as it relates to the presentation, performance, execution or exhibition of the major art forms.						
	Historical 351.101 (a) 5						
	Providing historical restoration, preservation programs and encouragement						
	to visit preserved historic sites or museums.						
	Convention Center 351.101 (a) 1						
	The acquisition of sites for and the construction, improvement, enlarging,						
	equipping, repairing, operation and maintenance of convention center						
	facility and/or information center.						
	Convention Registration 351.101 (a) 2						
	The furnishing of facilities, personnel and materials for the registration of						
	convention delegates and registrants.						
	Sporting Events 351.101 (a) 6						
	Expenses directly related to a sporting event in which the majority of						
	participants are tourists who substantially increase economic activity at hotels and motels within the municipality.						
	Transportation 351.110						
	Transporting of tourist from hotels to nearby tourism venues using transportation						
	systems which are owned, operated or financed by the city.						
2) Brie	ly state the purpose of your organization.						
3) Doe	s your organization have paid staff?						
,	Yes # Full-time # Part-time						
	No						
4) Doe	s your organization use volunteers?						
	Yes Approximately how many?						
	No						

	ur organizat Yes No					
) Is the ev	Yes	Name L	ocation(s)	_	ds for held on C	
	No	Name L	ocation(s)			
property	-	n be able to	provide insu	rance covera	age for the ever	nt if held on City
			ng your orgar nation is attac		ives and how m	nuch.
Source			Please C	ircle One		Dollar Amount
			Earned		-	
			Earned	Donated	\$	
			Earned	Donated	\$	
			Earned	Donated	\$	
			Earned	Donated	\$	
			Earned	Donated	\$	
			Earned	Donated	\$	
			Earned	Donated	\$	
	-		exhibits for th tially or in full.		year that the at	tached
	-				·	e events listed abo
in questi		0 Ci70	# From O	ut of Town	Hotel Nights	Event
•	Audienc	e Size				
in questi	Audienc	e Size				
in questi	Audienc	e Size				

	d/or Trans	. ,						
What specif	ic market	will you tar	get with the o	organization'	s marketing p	olan?		
Attach exan	nples and	evidence o	of marketing a	area and rea	dership. Lab	el Exhibit A (Limit	5)	
	Describe in detail how your event, program or exhibition will promote tourism and the hotel and convention industry.							
			nt, program o	r exhibition v	vill promote t	ourism and the		
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hotel and co	following	industry.	formation an					
Provide the	following	industry.	formation an					

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-	scribe the organization's long-term plan (3-5 year) in regard to the program, xhibition that funds are being requested.
-	f Denton requires segregated accounting of its HOT funds.
•	ons must maintain and account for revenue provided from the tax
	by section 351.101 (a) within one of two options listed below.
1	Separate checking account without commingling with any other revenues or
0	maintaining in any other bank account or
2) Maintain segregated fund accounting, whereby accounting of HOT revenues and expenditures may not be commingled with any other revenues or
	expenditures. The funds may be maintained in the same account, however,
	if HOT funds are invested, a separate account must be established.
	(All interest earned will be considered restricted HOT funds)
Will the or	ganization be able to segregate the accounting process in either way listed above?
	_Yes
	_No
Please pro	ovide all the following documentation with this application and label as directed.
Exhibit A	Provide examples and evidence of marketing area and readership. (limit 5)
Exhibit B	Provide the last two years' audited financials or balance sheets and income and experstatement.
Exhibit C	Provide the organization's last two years' itemized income and expenses for the event which your organization received Hotel Occupancy Tax funding.
Exhibit D	Provide a proposed budget for funds to be requested for use during the
	Program Year 2018. Each category request should detail all expenses
	planned for the total dollar. <u>This must be a separate sheet and not included</u> in the application answers.
Exhibit E	Letter of Determination certifying federal tax-exempt status under the Internal Revenue Code. Unless already on file.
Exhibit F	Current W-9.
Exhibit G	Proof of current status as a non-profit Texas corporation in good standings as reflected on the websites of the State Comptroller and Secretary of State.
Exhibit H	List <u>local</u> members of the governing body of the organization. Include title, mailing address and phone number.
Exhibit I	Provide schedule of <u>local</u> governing body's meetings.
Exhibit J	Provide constitution and/or by-laws. Unless already on file or if changes have not occurred.
Exhibit K	Provide list of all donations made by your organization last year. Include

organization and dollar amount.

We certify that the information in this application, including all exhibits and supporting documentation is true and correct to the best of our knowledge. It is understood and agreed that any funds awarded as a result of this application will be used for the purpose set for herein and the program guidelines.

Local Board Chairman:	
	(Print Name)
	x
	Date:
Project Director	
	(Print Name)
	X
	Date:

Late applications are subject to reduction or denial of funding.