# Somerset County 2016 Tourism Grant Application Capital

Sponsored by: Somerset County Board of Commissioners and administered by the Laurel Highlands Visitors Bureau

You must submit **FIVE (5)** copies of this application with attachments to:

Laurel Highlands Visitors Bureau (LHVB)
Somerset County Tourism Grant Program
120 East Main Street
Ligonier, PA 15658
Phone – 724,238,5661, Extension 101

Deadline for receipt at LHVB offices: No later than 4:30 PM on Friday, January 29, 2016

Applications may be mailed or personally delivered to the Laurel Highlands office. **Fax transmittals or e-mails will not be accepted**. Any application received after the deadline will be disqualified. Granting decisions will be determined and notification will be announced in mid-March, 2016.

#### NOTICE: HANDWRITTEN APPLICATIONS WILL NOT BE CONSIDERED

#### STATEMENT OF PURPOSE

Funds distributed in the form of grants are a portion of the hotel room occupancy tax collections. Grant funding thus should be primarily used

- For capital improvements to attractions and visitor related sites (museums, trails, historic homes, wineries, etc.), or
- To build or expand tourism and recreation attractions.

# **Grant Match and Eligible Expenses**

No capital grants will be made for more than one-half the value of the actual cost of the project, and a refunding agreement may be required. Please refer to the Somerset County Tourism Grant Program Criteria and Guidelines Section 1, Item B 1 – 3 for specific details on provisions of capital grants.

A variety of tourism-related capital projects are eligible for funding under this program including:

- Acquisition or restoration of historic or cultural exhibits, demonstrations, or shows.
- On site signage.
- Physical improvement projects that will enhance the visitor experience.

Only direct costs associated with tourism expansion/capital projects qualify for grant funds.

### Expenses not eligible for grant funding:

- Food, lodging, mileage and transportation costs.
- Purchase or rental of computers, software, projectors and other equipment.
- Telephone expenses.
- Postage and handling expenses, brochure racks.
- Envelops, letterhead, business cards, and miscellaneous office supplies.
- Membership dues, salaries and talent/dignitary honorariums.
- Rental of office space.
- Physical construction of billboards, and
- Gift cards, t-shirts and items for resale.

### **Grant Guidelines**

- No more than two grant applications are accepted from any single applicant (1 of each type).
- Grants are available for for-profit and non-profit organizations, according the County MOU.
- A federal identification number is required to submit an application.
- A credit line for the Somerset County Tourism Grant Program and its official logo must be included on any advertisement or literature paid for by the grant.
- Once notification is given to projects selected for a grant, a contract will be made between the
- Somerset County Grant Committee and the applicant outlining what can be funded with grant dollars.

Please refer to the Somerset County Tourism Grant Program Criteria and Guideline for more detailed information.

# **Grant Application Instructions**

## **Applications must include:**

- Completed cover page.
- No more than two (2) typed pages of narrative to <u>describe the project</u>, answering the questions specific to the application grant category.
- A budget worksheet specifically listing the projects' activities for which the grant will be used;
  - Must include copy of quotes and bids for all project activities identified in the budget worksheet.

**Submit five (5) copies of the entire application,** with each individual copy paper clipped. **DO NOT** staple set together and **DO NOT** place applications in folders or binders.

Key criteria grant committee members will take into account when reviewing and selecting tourism projects for funding:

- The project has the ability to draw or increase the number of tourists,
- The project provides a distinctive experience, and,
- The project has the potential to appeal to various age groups or to educate/develop appreciation by future generations.

# 2016 Somerset County Tourism Capital Grant Cover Page

(Complete This Page of Each Grant for Which You Are Applying)

Name of Grant Applicati	on/Project			
Legal Name of Sponsori	ng Organization			
Contact Person/Title				
Mailing Address				
City		State	Zip	
Phone	Web Site	Email		
Federal ID #				
Business/Organization I	Federal ID # Assigned T	0:		
Grant Amount Requeste	ed \$			
Cash Match \$		In-Kind Match \$		
Category (check )				
Capital Grant				
Signature of Applicant		Date		

If selected to receive a 2016 Grant, the grant check will be made payable to the organization/applicant/business whose name appears in the legal name section above. Non-profit organizations are also required to provide a copy of your IRS 501(c)(3) Determination Letter and a list of your current Board of Directors, with names, addresses, and phone numbers as well as when directors' terms of office expire.

**Submit five(5) copies of the entire application**, with each individual copy paper clipped. **DO NOT** staple set together and **DO NOT** place applications in folders or binders.

**DEADLINE:** If submitting via US Postal Service, the application must be postmarked no later than January 29, 2016. If delivering application by hand, the application must be turned into the Laurel Highlands Visitors Bureau office no later than 4:30 pm on January 29, 2016.

# Office mailing and delivery address:

Laurel Highlands Visitors Bureau 120 East Main Street Ligonier, PA 15658

# Take up to two (2) typed pages to answer the following questions

#### **SECTION I: General Information**

- 1. Provide a brief description of the organization/applicant/business:
- 2. If a cooperative project involving more than one entity, please list the names of the additional participants below [include organization name(s) and contact(s) and phone number(s)]:

Organization #1 Contact Phone #

Organization #2 Contact Phone #

(Additional organizations may be added here)

### SECTION II: Capital Improvement Grant Request

Capital Improvement Grant Requested:	\$
Total Projected Budget for this Project:	\$

Other funding sources and amounts include:

Please refer to the Somerset County Tourism Grant Program Criteria and Guideline for more detailed information.

## SECTION III: Capital Improvement Project Information

- 1. Please provide detailed information relative to the capital improvement project for which you are seeking a grant including:
  - a. Project description and location.
  - b. Provide an explanation regarding why this project is necessary to support tourism.
  - c. Proposed budget details (spreadsheet preferred), copies of bids and quotes for project.
  - d. Time line include anticipated start of project and project completion date.
  - e. Provide a breakdown of work to be provided by volunteers and that which will be provided by a paid contractor or craftsman.
- 2. How will your organization judge the effectiveness of this project? How will results be measured?
- 3. \*\*\*How will this project enhance or increase tourism in Somerset County?\*\*\*

  (Your response to this question is vitally important to the committees' decision relative to your application!)

# Complete this page, sign/date and check appropriate attachment boxes as the last page of your application

# **SECTION IV**: General Information

1.	If the ap	plicant is a <b>tourist attra</b>	action:	
	;	a. What were your annua	ual visitation numbers for the past two years?	
		2014:		
		2015:		
	I	o. How are the visitation	n numbers provided above determined?	
2.	If your b	ousiness is a lodging fac	acility:	
	;	a. How many rooms/be	eds are at your facility?	
	I	o. What was your annu	ual occupancy percentage for the past two years?	
		2014:		
		2015:		
		reminded that this gra	rant is not a permanent allocation and that there is no goe future.	juarantee of
and tha I/We ag Commit furnish	t the rece ree to ab tee will re said docu	eipt of any grant funds rela nide by all local, state, and equire receipts and a certit nmentation. I/We further u	cation and all attachments are true and correct to the best of my, ative to this request will be used for the purpose detailed within d federal laws and regulations. I/We understand that the Tourism ification to verify the expenditure of any grant funds received, and understand that the expenditure of grant funds received might be o cooperate with any such audit or verification process.	this application. In Grant Review Ind I/we agree to
Name (	(print):		Title:	
			<b>D</b> .	
Signatu	ıre:		Date:	
		on-profit organization ar		
Applica	ınt is a n	on-profit organization ar		
Applica	int is a n	on-profit organization ar	nd:	
Applica	int is a n copy of list of ap	on-profit organization ar applicant's non-profit orgonicant's Board of Direct	nd: rganization IRS 501(c)(3) Determination Letter is attached	

# 2016 Tourism Capital Grant Budget Worksheet (Include Advertising and Contractor Bids if Applicable)

Be specific regarding line item costs associated with this Capital Improvement Project. Be specific relative to the work to be provided by volunteers, as in-kind donations and that which will be provided by a paid contractor or craftsman

You must show how both the grant amount requested and the matches (both cash and in-kind) will be allocated among activities. Remember that the match must be at least 25% of the total cost and that at least half of the match (or 12.5% of the total cost) must be in cash. The other half of the match can be "in-kind," consisting of volunteer services and donated materials. Volunteer services should be valued at \$10 per hour.

County

		Name of	Grant	, , , , , , , , , , , , , , , , , , ,	
City/Town of Applicant	Federal ID#				
Activity	Grant Amount Requested	Match (Cash)	Match (In- Kind)	Source of Match	Total Funds
Column Totals:					

(Total of Grant Amount Requested + Match (Cash) + Match (In-Kind) Must Equal Final Column Total.)

Application/Project