

**ACCOMMODATIONS TAX**

**GRANT APPLICATION**



**Application Guidelines for**

**Accommodations Tax Grants**

Accommodations Tax Grants are provided to eligible projects through revenue received by the City for its share of the 2% lodging tax levied by the State of South Carolina. City Accommodations Tax Grants are awarded to eligible projects that physically take place within the corporate limits of the City of Anderson.

We invite you to apply this year. Funding is limited. Please consider this as you prepare your application.

As you prepare your application, please be mindful of the following requirements:

* Accommodations Tax Funds must be used to attract and provide for tourists, and must be spent on tourism-related expenditures. These advertising and promotions funds are for the purpose of developing and increasing tourist attendance through the generation of publicity. If an expenditure cannot be directly related to tourism, then accommodations tax revenue may not be used to fund the expenditure.
* In order to determine the “tourism” potential/exposure, applications should include an overall budget, percentage of tourists generated, a description of the event/project, and total attendance to the event/project.
* If this is a new project/event, then you must estimate this type of data in order to validate the “tourism” expenditures, and track it for the event/project.
* Projects/events approved for funding are provided such dollars on a reimbursable basis.
* “Travel” and “tourism” mean the action and activities of people outside of the home community. Data tracking can and should support and qualify any event that brings in tourists to a region and boosts the local economy.
* All applicants must have an IRS 501C Not for Profit Status.

An Accommodations Tax Advisory Committee, mandated by the State, reviews applications and makes recommendations to the City Council for the award of these funds. This committee is composed of seven representatives of the hospitality industry.

Please call the City of Anderson at 231-2601 and speak with Brittney Gamble or Mary Haley Thompson if you have questions.



**Accommodations Tax Grant**

**Application Instructions**

The Accommodations Tax Application form must be filled out completely. Supplemental information may be attached to the application, but not replace it.

Applications must be received by 5:00 p.m. on ***Friday, September 15, 2017***. Applications received after this time and date will not be accepted. (Special Note: This is not a postmark date.)

One (1) original plus eight (8) copies of the application should be mailed to:

City of Anderson

**Attn: Brittney Gamble**

401 South Main Street

Anderson, SC 29624

OR hand delivered to City Hall – **Attn: Brittney Gamble** at above address.

Following the September 15th deadline, the City of Anderson’s Accommodations Tax Advisory Committee will meet to review the applications. The committee will then make recommendations for funding to City Council. Applicants will be notified following the City Council’s funding decision.

Questions should be directed to Brittney Gamble or Mary Haley Thompson at 864-231-2601.

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| ColorlogoEC | | | | | | | | | | | | | For Office Use Only  Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Amount Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_  Amount Awarded: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |
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| **Accommodations Tax Grant Application** | | | | | | | | | | | | | | | | | | | | | |
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| Amount Requested: | | | | | | | | | | $ |  | | | Non-Profit Status: | | | | |  | | |
| Funds to be used for: | | | | | | |  | | | One-time event | | | |  | | Annual or recurring event | | | | | |
|  | | | | | | |  | | | Other (please list) | | | |  | | | | | | | |
| Project Name: | | | |  | | | | | | | | | | | | | | | | | |
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| What specifically will these requested funds be used for? | | | | | | | | | | | | | | | | | | | | | |
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| Date(s) of event: | | | | |  | | | | | | | | | | | | | | | | |
| Sponsor Organization: | | | | | | | |  | | | | | | | | | | | | | |
| Contact Name & Title | | | | | | | |  | | | | | | | | | | | | | |
| Address: | |  | | | | | | | | | | | | |  | | | | |  |  |
| Street or PO Box | | | | | | | | | | | | | | | City | | | | | State | Zip |
| Telephone: | | |  | | | | | | | | | E-mail: | | | | |  | | | | |
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| Project Description | | | | | | | | | | | | | | | | | | | | | |
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| Estimated Total Attendance: | | | | | | | | |  | | | | | | | | | | | | |
| Of this total attendance, what is the estimated number of tourists (non-residents) attending the event? | | | | | | | | | | | | | | | | | | | | |  |
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| How does this project attract visitors to the area and promote tourism? | | | | | | | | | | | | | | | | | | | | | |
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| Total Project Budget: | | | | | |  | | | | | | | | | | | | (Attach a copy of budget) | | | |
| List revenue sources and amounts for this event: | | | | | | | | | | | | | | | | | | | | | |
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| H. Additional Comments: | | | | | | | | | | | | | | | | | | | | | |
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| I hereby certify that the above information and statements are true according to my best information and that all Accommodations Tax Funds that may be received from the City of Anderson will be solely used for the purposes set forth in this application and will comply with all laws and statutes. | | | | | | | | | | | | | | | | | | | | | |
| Signed: |  | | | | | | | | | | | | | | | | | | | | |
| Title: |  | | | | | | | | | | | | | | | | | | | | |