Event # _____ for office only





MONROE COUNTY TOURIST DEVELOPMENT COUNCIL

APPLICATION FOR CULTURAL UMBRELLA EVENT FUNDING

October 1, 2021 through September 30, 2022

Upon evaluation of the application, the total scores will be tabulated and applications scoring 60 or more out of 100 will be considered for funding. Events that meet the minimum scoring requirements will be ranked starting with the highest score.

EVENT NAME: (used in all advertising)

DATE(S) OF EVENT:

EVENT WEBSITE:

INDICATE THE DISTRICT(S) FROM WHICH YOU ARE REQUESTING FUNDS and THE DOLLAR AMOUNT. **Maximum request: \$25,000.** Event must occur in the district.

District I	(encompasses the city limits of Key West)
District II	(from city limits of Key West to the west end of the Seven Mile Bridge)
District III	(from the west end of the Seven Mile Bridge to the Long Key Bridge)
District IV	(between the Long Key Bridge and Mile Marker 90.939)
District V	(from Mile Marker 90.940 to the Dade/Monroe County line and any mainland portions of Monroe County)

TOTAL AMOUNT REQUESTED (Districts I - V)

I. EVENT PRODUCER INFORMATION (The event producer is the organization or individual responsible for the event. In some cases, the event producer and the event are the same, for example: The Key Players. In other cases, they are different, for example: the Pigeon Key Arts Festival is the event; the Pigeon Key Foundation, Inc. is the producer.)

A. NAME OF CONTRACTING ORGANIZATION: (Registered business name as it appears on www.sunbiz.org)

FICTITIOUS NAME IF USED: ADDRESS:

TELEPHONE NUMBER: (Daytime) CELL NUMBER: E-MAIL ADDRESS: FEDERAL I.D. # / E.I.N. FLORIDA DIVISION OF CORPORATIONS DOCUMENT # FL DEPT. OF AGRICULTURE & CONSUMER SVCS REG. #

INDICATE ORGANIZATION STATUS: FOR PROFIT NOT FOR PROFIT

If a person other than the President will be signing the agreement, documentation in the form of approved minutes, resolution or by-laws of the organization identifying said individual as an authorized person to sign on behalf of the organization must be provided. It is the responsibility of the applicant to notify the TDC Administrative office of any changes to the contact information provided below.

PRESIDENT NAME:

PRESIDENT EMAIL ADDRESS:

Please provide a contact for general correspondence for the event. The person listed below should be able to accept responsibility for receipt of information, other than the final agreement.

CONTACT PERSON:

EMAIL:

TELEPHONE NUMBER:

ADDRESS:

MONROE COUNTY TOURIST DEVELOPMENT COUNCIL CULTURAL UMBRELLA

FISCAL YEAR 2022 October 1, 2021 – September 30, 2022

SCHEDULE OF ACTIVITIES

EVENT NAME:

List scheduled EVENT activities in Monroe County in date order *

Activities	Мо	nth/Year Activity Occurs	Numbe	er of Days**
	-		-	
	_		-	
	_		-	
	_		_	
	-		-	
	_		-	
	-		-	
	-		-	
	_		_	
Pre- Promotion: OCT/NOV 2022				xxxxx
	_		-	
	-		-	XXXXX

TOTAL DAYS:

TOTAL DAYS CANNOT EXCEED 365.

** Multiple activities within a calendar day (24 hour period) equals only 1 (one) day.

*If part of your funding request for *this* fiscal year is to promote event activities taking place in the *next* fiscal year (pre-promotion), then the following rules will apply:

- 1. Pre-promotion is **only** allowed for an event taking place during the months of October and November. If your event takes place after that, you must apply for funding in the next fiscal year.
- All pre-promotion funding <u>MUST</u> be spent prior to September 30th of the fiscal year you are funded in. (For example: If pre-promotion is for a November 7th event, you must place that ad and spend the money prior to September 30th.)

CULTURAL UMBRELLA EVENT BUDGET - FISCAL YEAR 2022

APPLICANT IS ADVISED PRIOR TO COMPLETING THIS BUDGET TO REFER TO THE ALLOWABLE MARKETING EXPENSES THAT WILL BE CONSIDERED FOR REIMBURSEMENT

THERE WILL BE NO AMENDMENTS TO THIS BUDGET AFTER BOCC APPROVAL OF THE AGREEMENT.

EVENT NAME:

1.*MEDIA PLACEMENT & PRODUCTION COST: (Only 30% of this line item may be spent on in-county advertising)	
2. PROMOTIONAL SIGNS:	
3. PROMOTIONAL ITEMS:	
4. DIRECT MAIL PROMOTIONS:	
5. PROGRAMS/PLAY BILLS:	
6. PUBLIC RELATIONS:	
7. ** GENERAL NON-ALLOCATED:	
(Funds applied to 1. Media Placement & Production Cost may only be applied to out-of-county advertising)	
<u>TOTAL</u>	

*No more than **30%** of 1. Media Placement and Production Costs line item shall be expended on advertising media costs attributable to in-county placement.

** 7. General Non-Allocated line item may not exceed 15% of the total funding allocation, and may only be expended for allowable event marketing expenses.

Actual expenditures may deviate no more than 10% from the budgeted line items noted above.

Please note: The TDC will only consider reimbursement of allowable marketing expenditures that highlight the special event versus the regular programming of a business, organization or the facility.

PART 2: JUSTIFICATION OF REQUESTED TDC RESOURCES:

Complete Sections #1 - 7. If no funds are requested in a category, mark it N/A.

IF FUNDS ARE REQUESTED FOR #1. MEDIA PLACEMENT AND PRODUCTION, it must be approved ONE WEEK in advance by **Tinsley Advertising**, Danielle Salman. danielle@tinsley.com 800-273-1242.

IF FUNDS ARE REQUESTED FOR #6. PUBLIC RELATIONS, it must be approved ONE WEEK in advance by **NewmanPR Associates,** Carol Shaughnessy. <u>carol@newmanpr.com</u> 305-797-0579.

1. Media Placement and Production: REQUESTED

Proposed Med	Proposed Media Placement with TDC Funds				
Name of Out-Of-County Media Publication	Circulation/Impressions	Estimated Amount Allocated			
	Sub-Total Out-Of-County:				

Name of In-County Media Publication	Circulation/Impressions	Estimated Amount Allocated	
	Sub-Total In-County:		
	TOTAL Media Spend:		

2. Promotional Signs: REQUESTED

3. Promotional Items: REQUESTED

4. Direct Mail Promotions: REQUESTED

5. Progams/Playbills: REQUESTED

6. Public Relations: Identify the agency or PR professional who will prepare this PR. REQUESTED

7. General/non-allocated funds: REQUESTED

TOTAL REQUESTED:

PART 3: SCORED PORTION OF THE APPLICATION:

EVENT NAME:

I. PROPOSED EVENT INFORMATION -- Based on Schedule of Activities (page 3)

A. MONTH(s) OF EVENT Activities: Please check the appropriate month. If an event takes place over a series of months the scores will be added to a maximum of **7** points.

October	4	April	1
November	4	May	4
December	3	June	4
January	2	July	4
February	1	August	6
March	1	September	6

Score: 1 2 3 4 5 6 7

B. NUMBER OF DAYS -- Based on Schedule of Activities (page 3)

Please check the appropriate range.

1-14 days 4 15-120 days 5 121-365 days 6

Score: 4 5 6

C. ATTENDANCE Number of people anticipated to attend the event, the number attending this current year, and actual past attendance:

Total Attendance for Events

	Anticipated 10/1/2021 - 9/30/2022	Current 10/1/2020 - 9/30/2021	Actual 10/1/2019 - 9/30/2020
Monroe County Residents			
Out of County			
TOTAL			

DETERMINATION OF ATTENDANCE FOR EVENTS DESCRIBE YOUR AUDIENCE:

How do you determine your numbers, mention walk-ins, how you count, how you ask county/out of county?

II. STATEMENT OF INCOME & EXPENSE for the EVENT:

The figures for the last completed year (right column) should be actual. The other years should be your best estimates for the income and expenses of the events that match what is listed in the Schedule of Activities for the grant year (left column) – and comparable events in the current year (middle column). These are budget numbers for 12 months in each fiscal year.

EVENT NAME:

EVENT INCOME

(DO NOT INCLUDE IN-KIND) Use October 1 – September 30	PROPOSED FY 2022	CURRENT FY 2021	ACTUAL FY 2020
A. CULTURAL UMBRELLA FUNDS	*	**	***
ENTRY/ADMISSION/BOX OFFICE			
PROMOTIONAL ITEMS			
FOOD/BEVERAGE			
SPONSORS/CONTRIBUTIONS			
MEMBERSHIPS			
GRANTS – State & Local			
OTHER			

B. TOTAL EVENT INCOME		
-----------------------	--	--

* Requested

** As Contracted with the TDC

***As Reimbursed by the TDC

Cultural Umbrella funds for the proposed FY are

% of Total Income. (A divided by B x 100)

Did you receive a Cultural Umbrella Grant in 2019-2020? YES NO

If yes, fill in Cultural Umbrella Grant Report for your 2019/20 grant. If no, disregard that page.

EVENT NAME:

EVENT OPERATING EXPENSES –

(use October 1 – September 30)	PROPOSED FY 2022	CURRENT FY 2021	ACTUAL FY 2020
C. CULTURAL UMBRELLA FUNDS *			
D. MARKETING/ADVERTISING ADDITIONAL TDC ALLOWABLE			
E. MARKETING/ADVERTISING ADDITIONAL TDC NON-ALLOWABLE			
EVENT OPERATING EXPENSES			

F. TOTAL EVENT EXPENSES		

NET PROFIT/LOSS (B minus F)			
-----------------------------	--	--	--

Cultural Umbrella Funds % of Total Allowable Advertising

% C divided by (C+D) x100

Please note: Line A and Line C must match.

NARRATIVE (optional)

Cultural Umbrella Final Grant Report for 2019-2020

Event Name:			_Grant Year
2019-2020 Grant in this grant year?	yes	no	
If no, stop here. If yes, complete form			

Grant #: _____

Grant Award Amount: _____

Executed/Reimbursed Amount: _____

Difference (unreimbursed balance*) : _____

NARRATIVE 1: EXPLANATION of the Unreimbursed Balance* (100 WORDS):

NARRATIVE 2: PROPOSED IMPROVEMENTS TO THE PROCESS: (100 WORDS)

III. HOW THE PROPOSED EVENT WILL ENCOURAGE TOURISM

NARRATIVE: For the TDC supported events/activities listed in Schedule of Activities, explain why you think your PROPOSED event(s), and supporting activities will help draw people from outside of Monroe County, or encourage them to extend their stay.

Please do **not** assume the reader/scorer is familiar with your event. Walk us through your **proposed** event(s) for the award period. (LIMIT 750 WORDS)

IV. MARKETING YOUR EVENT OUTSIDE MONROE COUNTY

For the TDC supported events/activities listed in Schedule of Activities: Describe **all plans** to market the event(s) to reach visitors **outside** of Monroe County. Include all marketing activities out of county (TDC financed and all other). **Be specific**: how will you **EXPAND** your plan for out of county with the requested TDC/Cultural Umbrella funds. (LIMIT 750 WORDS)

PART 4: TRAFFIC/SECURITY ACTION PLAN AND CODE ENFORCEMENT

Submit a detailed action plan including appropriate permit(s) if applicable, as to how parking/security and road closures will be handled during your event.

Describe how your event plan will handle road closures. If applicable, enclose a copy of the approval by the appropriate county/municipal entity.

- 1. Describe how your event plan will accommodate parking and transportation.
- 2. Describe how your event plan will handle security.

CODE ENFORCEMENT: Does your organization/property have any outstanding code violations and/or fines/costs or liens? Yes \square No \square If you have answered yes, please explain below:

<u>Useful contact numbers</u>: <u>Monroe County</u>: (305) 289-6037 <u>City of Key West</u>: (305) 809-3902 <u>City of Marathon</u>: (305) 289-6037 <u>Islamorada Village</u>: (305) 853-3433

PART 5: EVENT SUSTAINABILITY ACTION PLAN - Please answer A - E.

Our visitors come to enjoy events, but in the process, a tremendous amount of waste is generated, much of it recyclable. The most effective tool in reducing waste is planning ahead.

A. Encourage recycling messages within programs/brochures to recycle during the event and at home.

B. Encourage "Green" advertising (broadcast and digital).

C. Encourage vendors to use biodegradable/compostable products (plates, cups; bags).

D. Encourage the use of clearly identified recycling containers.

E. Discourage use of single use plastic bags and other products.

Event Number

Event Name

Total Score

2021-2022 Cultural Umbrella Event Score Sheet for office use only

- _____ (1 7 pts) Months of Event
- _____ (4 6 pts) Number of Days
- _____ (0 17 pts) Statement of Income (7) Expense (7) Report (3)
- _____ (0 30 pts) How the Proposed Event Will Encourage Tourism
- _____ (0 30 pts) Marketing Your Event Outside Monroe County
- _____ (0 10 pts) Overall Assessment
 - (0 3 pts) First Time Applicant in Specified District

_____ TOTAL SCORE

Committee Member Signature_____