



## MONROE COUNTY TOURIST DEVELOPMENT COUNCIL

## APPLICATION FOR CULTURAL UMBRELLA EVENT FUNDING

October 1, 2019 through September 30, 2020

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.

NAME OF PROPOSED EVENT:

(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 (Total 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 <u>www.sunbiz.org</u>)

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

## **NEW FOR THIS YEAR**

The Monroe County Clerk of the Court now accepts electronic signatures on agreements. If funding is awarded, the final agreement will need to be sent <u>directly</u> to the President of the applicant organization (as listed above) for electronic signature. The email <u>cannot</u> be forwarded to another email address. 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 (for correspondence): TELEPHONE NUMBER (Daytime/mobile): ADDRESS:

### MONROE COUNTY TOURIST DEVELOPMENT COUNCIL CULTURAL UMBRELLA SCHEDULE OF ACTIVITIES

FISCAL YEAR 2020 October 1, 2019 – September 30, 2020

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 2020	_		-	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 30<sup>th</sup> of the fiscal year you are funded in. (For example: If pre-promotion is for a November 7<sup>th</sup> event, you must place that ad and spend the money prior to September 30<sup>th</sup>.)

## CULTURAL UMBRELLA EVENT BUDGET - FISCAL YEAR 2020

#### 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:

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

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

\*\*The General Non-Allocated line item may not exceed 15% of the total funding allocation, and may only be utilized for allowable event marketing expenses other than in county media placement.

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:

**IF FUNDS ARE REQUESTED FOR MEDIA PLACEMENT AND PRODUCTION,** that proposed marketing plan must be approved ONE WEEK in advance by **Tinsley Advertising, Karen Piedra**. <u>karen@tinsley.com</u> 800-273-1242, Attach your approval letter at end of your originall application.

**IF FUNDS ARE REQUESTED FOR PUBLIC RELATIONS,** that proposed marketing plan must be approved ONE WEEK in advance by **NewmanPR Associates**, Carol Shaughnessy. <u>carol@newmanpr.com</u> 305-797-0579. Attach your approval letter at end of your originall applicatio

#### IF NO FUNDS ARE REQUESTED IN ANY CATEGORY, MARK IT N/A.

1. Media Placement and Production: (Provide details on spreadsheet below) REQUESTED

PLEASE NOTE: At least 70% of your media must be OUT-OF-COUNTY and no more than 30% IN-COUNTY.

Name of Out-Of-County Media		Estimated Amoun	
Publication	Circulation/Impressions	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
1-14 uays	4	10-120 uays	5	121-505 uays	0

#### 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 10/1/2019 - 9/30/2020	Current 10/1/2018 - 9/30/2019	Actual 10/1/2017 - 9/30/2018
Monroe County Residents			
Out of County			
TOTAL			

<u>DETERMINATION OF ATTENDANCE FOR EVENTS</u> DESCRIBE YOUR AUDIENCE: How do you determine your numbers, please mention walk-ins, how you count, how you ask county/out of county?

#### **II. STATEMENT OF INCOME & EXPENSE for the EVENT:** FOR **PROPOSED EVENT, CURRENT YEAR,** AND **LAST COMPLETED YEAR**

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 you have in Schedule of Activities for the grant year (left column) – and comparable events in the current year (middle column). These are budget numbers.

EVENT NAME:

# **EVENT INCOME**

	PROPOSED		CURRENT ESTIMATE	ACTUAL
(DO NOT INCLUDE IN-KIND) Use October 1 – September 30	FY 2020		FY 2019	FY 2018
A. CULTURAL UMBRELLA FUNDS		*	**	***
ENTRY/ADMISSION/BOX OFFICE				
PROMOTIONAL ITEMS				
FOOD & BEVERAGE				
SPONSORS/CONTRIBUTIONS				
MEMBERSHIPS				
GRANTS – State & Local				
OTHER				

B. TOTAL EVENT INCOME		

Cultural Umbrella funds for the proposed FY areof Total Income.(A divided by B x 100)Did you receive a Cultural Umbrella Grant in 2017-2018?YESNOHow much were you awarded?How much were you reimbursed?

\* Requested

\*\* As Contracted with the TDC

\*\*\*As Reimbursed by the TDC

## EVENT NAME:

# **EVENT EXPENSES**

	PROPOSED FY 2020	CURRENT FY 2019	ACTUAL FY 2018
EVENT OPERATING EXPENSES – (use (			
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 PERCENT OF TOTAL ALLOWABLE ADVERTISING :

(Compute percent by dividing Line C by the total of C + D and then multiplying the answer by 100) .....This will reflect the percent of the TDC funding to the total allowable funding for the event.....

\* Cultural Umbrella Funds must match line A on INCOME (page 9)

NARRATIVE (optional)

Score: 0 - 20

## **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)

Score: 0 - 30

## 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 (TDC financed and all other). Be specific: how will you **EXPAND** your own plan with the requested TDC/Cultural Umbrella funds. Explain the benefit of TDC Marketing (LIMIT 750 WORDS)

Score: 0 - 25

## 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 of Islands</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 single most effective tool in reducing waste at special events is planning ahead

- A. Encourage recycling message within programs and brochures to recycle during the event and also at home.
- B. Encourage "Green" advertising (broadcast and digital).

C. Encourage vendors to use biodegradable/compostable products (utensils; plates and cups; paper or canvas 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** 

# 2019-2020 Cultural Umbrella Event Score Sheet

- (1 7 pts) Months of Event
- \_\_\_\_\_ (4 6 pts) Number of Days
- \_\_\_\_\_ (0 20 pts) Statement of Income and Expense
- \_\_\_\_\_ (0 30 pts) How the Proposed Event Will Encourage Tourism
- \_\_\_\_\_ (0 25 pts) Marketing Your Event Outside Monroe County
- \_\_\_\_\_ (0 12 pts) Overall Assessment

# \_\_\_\_\_ TOTAL SCORE

Committee Member Signature\_\_\_\_\_