

2020 CITY OF MONROE LODGING TAX FUNDING APPLICATION

Applicant Information

Organization/Agency Name: City of Monroe

Mailing Address: 806 West Main Street

City: Monroe State: WA Zip Code: 98272

Street Address: _____
(if different from mailing address)

City: _____ State: _____ Zip Code: _____

Contact Person and Title: Katie Darrow, Parks & Recreation Events & Tourism Coordinator

Contact Phone: (360) 863-4519 E-mail: kdarrow@monroewa.gov

Organization Website: www.monroewa.gov

Organization is: Government Entity 501(c)(3) 501(c)(6)
 Other _____

(Verification of 501(c)(3) or 501(c)(6) status will be required as part of the application)

Federal Tax ID Number: _____ UBI Number: _____

Requesting funds for the following activity:

<input checked="" type="checkbox"/>	Tourism Promotion/Marketing Complete pages 2 and 3 and pages 8 thru 11 of the application.
<input type="checkbox"/>	Operation and/or marketing of a Special Event/Festival designed to attract tourists Complete pages 2 thru 7 of the application.
<input type="checkbox"/>	Operation of a Tourism Promotion Agency Complete pages 2 and 3 and pages 8 thru 11 of the application.
<input type="checkbox"/>	Operation of a Tourism-Related Facility owned or operated by a non-profit organization Complete pages 2 and 3 and pages 8 thru 11 of the application.
<input type="checkbox"/>	Operation and/or capital costs of a Tourism-Related Facility owned by the City or a Public Facilities District Complete pages 2 and 3 and pages 12 thru 13 of the application.

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Certification

I am an authorized agent of the organization/agency applying for funding. By signing this application, I understand that: (initial each statement after reading)

KD Washington limits how hotel/motel taxes may be used. I am proposing a tourism-related service for fiscal year 2019. If awarded, requested funds will be used only for purposes described in this application and established by state law. I understand the use of these funds are subject to audit by the Washington State Auditor.

KD if awarded, my organization/agency intends to enter into a municipal services contract with the City of Monroe, provide liability insurance or obtain special event insurance as may be required for the duration of the contract naming the City of Monroe as an additional insured and in an amount determined by the City, and file for a permit to use City property, if applicable. In addition, my organization/agency will provide proof of or obtain a City of Monroe business license, if required.

KP my organization/agency cannot obligate any hotel/motel funds which may be awarded prior to the execution of the municipal services contract with the City of Monroe. Any expenses incurred by my organization/agency prior to the signing of the contract will not be eligible for reimbursement.

KD the City of Monroe will only reimburse those costs actually incurred by my organization/agency and only after the service is rendered, paid for if provided by a third party, and a signed Request for Reimbursement form (or other form acceptable to the City) has been submitted to the City, including copies of the invoices and payment documentation.

KP my organization/agency will be required to submit a report documenting the economic impact results of my funded activity, to include the number of tourists the event reached and the methods by which my organization/agency surveyed the attendance. Failure to provide this information within the timeframe required by the municipal services contract can affect my organization's/agency's ability to receive expense reimbursements and affect our future funding eligibility.

I certify that I have the authority of the organization/agency represented in this application to submit this request for funding on its behalf and I further certify that the foregoing is true and correct to the best of my knowledge:

Katie Darrow
Print Name

Parks & Rec Events & Tourism Coord.
Title

Katie Darrow
Signature

8/1/19
Date

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Page 8

Applicant Name: City of Monroe Amount requested: \$6,500.00

Tourism Impact Estimates - Promotion/Marketing/Operations

Priority consideration will be given to requests which encourage off-season tourism (November thru April).

1. Identify the specific tourism audience/market located more than 50 miles from the City of Monroe that your organization will target with these funds (attached additional sheets if necessary):

Visitor Center patrons and hotel guests statewide through visitor center and information racks. Triathlon athletes, wakeboarding competitors, youth baseball participants, speedway racing fans, and equestrian enthusiasts. This brochure will compliment the City's Choose Monroe Magazine.

2. Regarding the tourism audience/market identified in question 1, describe in detail the promotion activities that will be performed or provided with the requested funding (attach additional sheets if necessary):

Create vibrant destination events and tourism brochures that promote the City's brand as an adventure destination for tourists year-round. Distribute brochures that are easy to grab and keep handy to visitor information stations and racks throughout the state. In order to sustain and grow National events such as pro wakeboard, TriMonroe, key auto races, equestrian events and to ensure their return, it is imperative that local and regional marketing efforts include the production and distribution of the destination marketing rack brochures. In 2019 over 10,000+ rack cards were distributed to 40+ locations throughout Western Washington and we are looking to expand this number in 2020.

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Budget/Request Estimates

For the following section, list the proposed quantity of specific tourism promotional/marketing/operations activities described in #2 on page 8 and its corresponding funding request. The total for column C on page 11 must match your total funding request.

Column A Activity (see disclaimer on page 7)	Column B Number Projected	Column C Funding Requested
In person contacts (describe how contacts will occur): <hr/> <p style="text-align: center;">N/A</p> <hr/>	<hr/>	<input type="checkbox"/> Part of Personnel costs on page 9 or \$ _____
E-mail or phone contacts (describe when and how frequently contacts will occur): <hr/> <p style="text-align: center;">N/A</p> <hr/>	<hr/>	<input type="checkbox"/> Part of Personnel costs on page 9 or \$ _____
Brochures produced/printed (describe distribution method): <hr/> <p style="text-align: center;">See operations box</p> <hr/>	<hr/>	<input checked="" type="checkbox"/> Part of Personnel costs on page 9 and/or \$ <u>N/A</u>
Brochures distributed/mailed (describe distribution method): <hr/> <p style="text-align: center;">See operations box</p> <hr/>	<hr/>	\$ _____
Subtotal Column C		\$ 0

Continued on page 11

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Budget/Request Estimates

For the following section, list the proposed quantity of specific tourism promotional/marketing/operations activities described in #2 on page 8 and its corresponding funding request. The total for column C on page 11 must match your total funding request.

Column A Activity (see disclaimer on page 7)	Column B Number Projected	Column C Funding Requested
Radio/TV ads (describe stations/markets reached): <hr/> <div style="text-align: center;">N/A</div> <hr/>	<hr/>	\$ <hr/>
Website (describe how you will track site hits/views): <hr/> <div style="text-align: center;">N/A</div> <hr/>	<hr/>	<input type="checkbox"/> Part of Personnel costs on page 9 and/or \$ <hr/>
Other Digital/Social media (list targeted sites): <hr/> <div style="text-align: center;">N/A</div> <hr/>	<hr/>	<input type="checkbox"/> Part of Personnel costs on page 9 and/or \$ <hr/>
Print ads (list newspaper(s)/periodical(s)/tourism print media): <hr/> <div style="text-align: center;">N/A</div> <hr/>	<hr/>	\$ <hr/>
	Subtotal Column C	\$ 0
Total Column C of subtotals on pages 9, 10, and 11 Amount must match total requested.		\$