



For Accommodations Tax Committee Use Only

Amount Requested: \$	_____
Date Received:	_____
File # 12-13	_____
Date Reviewed:	_____
Information Complete	_____
Need More Information	_____
Date Contacted	_____
Amount Awarded: \$	_____
Date Award Notifications Sent:	_____

**ACCOMMODATIONS TAX FUNDING PROGRAM
 CITY OF CAMDEN
 CAMDEN, SOUTH CAROLINA**

FUNDING APPLICATION

THE APPLICATION MUST BE **TYPED AND RETURNED WITH 10 COPIES**

DEADLINE: Received no later than 5:00 pm on April 6, 2012. Follow Application Procedures in guidelines when completing this application.

1.) Name of Project: _____

2.) Sponsor(s) Name: _____

Telephone: _____ Fax: _____ E-mail: _____

Mailing Address: _____
 Street _____ City _____ State _____ Zip Code _____

3.) Project Coordinator: _____

Telephone: _____ Fax: _____ E-mail: _____

Mailing Address: _____
 Street _____ City _____ State _____ Zip Code _____

4.) Organization Federal ID Number: _____

5.) Has organization been funded through the City of Camden Accommodations Tax Funding Program in the past? () Yes () No

If yes, when and amount each year:

July 2009 - June 2010

July 2010- June 2011

July 2011 - June 2012

\$ _____

\$ _____

\$ _____

- 6.) Project Category:
- Advertising & Promotion of Tourism
 - Advertising & Promotion of Arts/Cultural Events
 - Advertising & Promotion of Large Tourist Events

Project Planning & Evaluation Duration: From: _____ To: _____
 Project Date (*Must occur between July 1, 2012 - June 30, 2013*): _____

- One Time Project Ongoing Project New Project Existing Project

7.) Is the program/event located within the City of Camden's corporate limits? Yes No

Where is the location of the Project? _____

8.) Estimated total attendance for new or one time project. _____ OR

Total attendance the last time the event was held: _____

9.) Estimated tourist attendance for new or one time project. _____ OR

Total tourist attendance the last time the event was held: _____

10.) Distribution Plan (Check all that applies & attach appropriate documentation to the back of this application.)
 This section is to show only how the City of Camden A-Tax Grant will be utilized if awarded.

- Rack Cards
 List names and locations of distribution sites on separate sheet and attach to this application
- Brochures Number to be distributed: _____
 List names and locations of distribution sites on separate sheet and attach to this application
- Posters Number to be distributed: _____
 List names and locations of distribution sites on separate sheet and attach to this application
- Magazine Ads Number of Ads _____
 List magazine names and distribution range on separate sheet and attach to this application
- Newspaper Ads Number of Ads _____
 List newspaper names, locations & distribution range on separate sheet & attach to this application
- Television Ads Number to be Aired _____
 List station names, location of stations & viewing range on separate sheet & attach to this application
- Radio Ads Number to be Aired _____
 List station names, locations & listener range on separate sheet & attach to this application
- Billboards Number to be Posted _____
 List locations of billboards and viewer information on separate sheet and attach to this application
- Website List target area (ie: South Carolina, Southeast, National, etc.) _____
- Other _____

DO NOT FORGET TO ATTACH THE DOCUMENTATION REQUESTED IN # 10 TO THE BACK OF THIS APPLICATION

11.) A. Total Budget for Event: \$ _____
B. City of Camden A-tax Funds Requested: \$ _____
C. Applicant Funds Provided: \$ _____
(including any other monies or grants)

12.) Description of the Project:
General Description:

Specifically how will this project benefit the economy in the City of Camden? (Be detailed in your justification and attach a separate sheet of paper is necessary):

How does this project attract state, regional, and national audiences? (Be detailed in your justification and attach a separate sheet of paper if necessary)

to be received:

	Pending	Approved	Amount
() Accommodations Tax: City of Camden <i>(This amount should be the same as the total listed under number 11b)</i>	\$	\$	\$
() Kershaw County	\$	\$	\$
() Private Funds/Grants	\$	\$	\$
() Donations	\$	\$	\$
() SC Parks, Recreations, and Tourism: Marketing Partnership Program	\$	\$	\$
() Other (please list)	\$	\$	\$
_____	\$	\$	\$
_____	\$	\$	\$
_____	\$	\$	\$
_____	\$	\$	\$
TOTAL ANTICIPATED PROGRAM REVENUE			\$

14.) Statement of Assurances

If the grant application is awarded funding, we agree, as representatives of the organization names in this application, to provide any and all records pertaining to this grant for inspection by the City of Camden Accommodations Tax Committee upon request.

_____	_____
Project Coordinator's Name (Typed)	Date
_____	_____
Project Coordinator's Signature	Date
_____	_____
Administrative Official's Name (Typed)	Date
_____	_____
Administrative Official's Signature	Date

RETURN TO:

City of Camden Accommodations Tax Committee
 PO Box 7002
 Camden, South Carolina 29020

Attention: Mary Rupe

DEADLINE
April 6, 2012
BY 5:00 PM

If additional space is needed
 please attach a 8 1/2" x 11" sheet
 to the back of this form.