

## **Hotel Occupancy Tax** **Funding Application**



### **Eligibility:**

1. Any organization, non-profit, or entity may apply for funding.
2. The applicant must be located in the City's corporate limits, extra-territorial jurisdiction, or in sufficiently close proximity as to reasonably attract tourists to the City.
3. The application must demonstrate that the funds will be used to promote tourism, as well as the hotel industry for the Jacksboro region.
4. The applicant must be an organization or corporation governed by a board of directors.
5. The applicant must be a legal entity with legal capacity to enter into contracts.
6. The applicant must demonstrate that the programs and/or events are open and appropriate for the general public.
7. The applicant must demonstrate that they are in good financial standing and that financial safe guards are in place to protect public funds.

### **Application Process:**

If you meet all the above criteria, complete the **H.O.T. Application** and **Post Event Report Form**.

Submit the completed Application, the completed Post Event Report Form with estimates of event/project, and the necessary documents to the City of Jacksboro **not less than 45 days before the event**. First, the City will review the application to verify that all information has been received. If there is missing information or documents, the City will notify the requesting organization of any additional needs. Once the application is complete, it will be reviewed by the City Council within 30 days of receipt by the City.

At the time of review, the organization must attend to present its' request for H.O.T. funds. If funding is awarded by the Council, a contract will be drawn up and the organization is required to return two signed original contract documents prior to the event taking place. If the documents are not returned, that is considered a rejection of the funding offer.

### **Reporting and Reimbursement:**

The organization is responsible for completing the Post Event Report Form with the finalized information explaining the use of Hotel Occupancy Tax Revenues within **30 days of the event**. The organization **must provide receipts** for review to affirm that the expenses comply with Chapter 351 of the Tax Code and the City of Jacksboro's Hotel Occupancy Tax Use Policy.

### **Required Attachments: (documents must be single-sided and unbound)**

1. Most recently audited financial statements.
2. Provide a proposed budget of the event.
3. List of current Board of Directors and administrative staff.
4. A copy of the organization's financial policies.
5. Proof of insurance.

At its expense, the City of Jacksboro has the right to audit the books or financial records of any organization that receives Hotel Occupancy Tax revenues.

Any funded applicant must notify overnight lodging establishments of the upcoming event, and any promotional material must reference Jacksboro lodging establishments. In addition, list the City of Jacksboro as a sponsor/partner of the event or project.

**Hotel Occupancy Tax  
Funding Application**



**Organization Information**

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Website: \_\_\_\_\_

Non-profit                      Yes                      No      Federal Tax I.D. #: \_\_\_\_\_

Write a short description about your organization:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Proposal Information**

Name of the Event/Project and a short description.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Duration of the Event:    Start Time \_\_\_\_\_                      End Time \_\_\_\_\_

Amount of H.O.T. funds requested? \_\_\_\_\_

Name of Organization: \_\_\_\_\_

List other sources of funding:

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Are there any other community partners? (if so, please list them below) Yes  No

List partners if necessary:

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Nature of Request (check all that apply.)

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| <input type="checkbox"/> Advertising           | <input type="checkbox"/> Promotion of the arts             | <input type="checkbox"/> Signage directing visitors to sites and attractions |
| <input type="checkbox"/> Solicitation of event | <input type="checkbox"/> Historical restoration or museums | <input type="checkbox"/> Other   |
| <input type="checkbox"/> Promotional Programs  | <input type="checkbox"/> Promotion of Sporting events      |  |

Has this project been conducted before? Yes  No

If yes, how many years/times? \_\_\_\_\_

Previous year attendance: Local Visitors \_\_\_\_\_ Out of Town Visitors \_\_\_\_\_

Projected attendance this year: Local Visitors \_\_\_\_\_ Out of Town Visitors \_\_\_\_\_

Number of years that you have received H.O.T. funds? \_\_\_\_\_

Name of Organization: \_\_\_\_\_

How does the project/event directly impact tourism in Jacksboro?

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How does the project/event directly promote and aid the hotel industry? (i.e. increase overnight visitors)

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What outside marketing is going to be conducted and how will it be effective?

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How does the project/event contribute to Jacksboro?

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Name of Organization: \_\_\_\_\_

I certify that the information contained in this application is correct to the best of my knowledge and that I am authorized to make this application on behalf of the organization herein described for the purpose of receiving City of Jacksboro H.O.T. funds.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_