

# Accommodations Tax Application Guidelines

Thank you for your interest in **Cherokee County Accommodations Tax Program**. The following policies and procedures for making an application to the Tourism-related Fund are provided below for your assistance. Grant Overview & Guidelines are also attached for your information and should be reviewed prior to making an application.

Funding provided by Accommodations Tax used for promotion and advertising specifically designed to bring tourists to Cherokee County, is made under the provision that the Cherokee County will be listed as a co-sponsor on all advertising, including, but not limited to, all print media, radio, television and web ads. Funds can only be awarded to those projects that will attract people to stay overnight in Cherokee County and to frequent Cherokee County restaurants.

Grants funds from the Accommodations Tax Program should be considered supplementary to the budget of any applicant, and unless otherwise approved, must be used within the fiscal year for which the funds were approved.

## **DEADLINE FOR SUBMITTING APPLICATION:**

**NUMBER OF COPIES:** Applicant should submit one (1) original and eight (8) unbound applications (binder-clips acceptable). All applications must be typed/printed.

**ELIGIBLE APPLICANTS:** The applicant must be a public or private **non-profit** organization.

**DISBURSEMENT OF FUNDS:** Generally, funding is of the reimbursement method with appropriate documentation (i.e., signed contract(s), detailed invoice(s), canceled check(s), etc.).

**FINANCIAL STATEMENTS:** If your organization received funding last year, a copy of the final financial statement must accompany this application.

**OTHER ACCOMMODATIONS TAX FUNDING:** Organizations must indicate any other accommodations tax funds they have requested or received from other municipalities or counties for this funding year.

**FUNDING APPROVAL:** Funding in one calendar year does not automatically ensure funding in subsequent years. Organizations seeking accommodation tax funding must submit an application each year. The Cherokee County Accommodation Tax Committee will hold a public meeting to review applications, and if deemed appropriate, to hear presentations from selected applicants.

**IMPORTANT:** Please note that a representative from your organization **must** be present at the accommodations tax advisory committee meeting to answer any questions or provide additional information needed by the committee. Failure to have a representative present at this meeting could result in your application to be dismissed without consideration.

# CHEROKEE COUNTY

## ACCOMMODATIONS TAX FUNDS

1. Application for Accommodations Tax Funds
2. Copy of latest financial statement\*
3. Proof of non-profit status

\*If your organization does not have a financial statement, please provide copies of the last Accommodations Tax Expenditures (include copies of cancelled checks and receipts)

IMPORTANT: Please note that a representative from your organization must be present at the accommodations tax advisory committee meeting to answer any questions or provide additional information needed by the committee. Failure to have a representative present at this meeting could result in your application to be dismissed without consideration.

ALL APPLICATIONS MUST BE SUBMITTED TO:

**CHEROKEE COUNTY ADMINISTRATION  
ATTN: ABI REID  
110 RAILROAD AVE  
GAFFNEY, SC 29340**

<b>Accommodations Tax Funds</b>  <b>Project Application</b>	<b><u>Advisory Committee Use Only</u></b>
	Date Received: _____
	Funding Requested: _____
	( ) Applications Complete
	( ) Need More Information

# APPLICATION

CHEROKEE COUNTY

ACCOMMODATIONS TAX FUNDS

AMOUNT REQUESTED: \$ \_\_\_\_\_

I. Applicant Information

Project Name: \_\_\_\_\_

Organization/Agency: \_\_\_\_\_

Non-Profit Status: \_\_\_\_\_

Organization's Representative: \_\_\_\_\_

Title: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

II. Project Description:

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Project Category: Tourism/Promotion\* ( ) Arts/Cultural ( )

Project Duration: From: \_\_\_\_\_ To: \_\_\_\_\_

One Time Project ( ) Ongoing Project ( )

New Project ( ) Existing Project ( )

\*Tourism is generally defined as attracting tourist who travel 50 miles to attend an event or project

### III. Project Goals and Objectives:

Describe project goals and objectives (attach additional sheets if necessary)

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**IV. Project Justification**

Answer the following questions thoroughly and in specific and measurable terms, i.e.: performance outcomes, number of participants, revenues generated, etc.

- 1) How will this program meet the objective?
- 2) How will this program encourage tourism, enhance our citizens' quality of life, or attract new visitors to Cherokee County?
- 3) How many people do you anticipate attending to your event/project?
- 4) How many of those in attendance will travel at least 50 miles to attend your event/project?
- 5) How will achievement of project objectives be measured?
- 6) How will this funding be coordinated with private funding for maximum project success?
- 7) If applicable, demonstrate how previous funding has successfully met program objectives.
- 8) If this program requires funding beyond the current year, explain how the organization or agency plans to fund the program in the future year.

If your organization has received Accommodations Tax from Cherokee County within the past three (3) years, please indicate the following:

<u>Year Received:</u>	<u>Amount Received:</u>	<u>Use of Funds:</u>
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

If your organization has received Accommodations Tax Funds from sources other than Cherokee County within the past three (3) years, please indicate the following:

<u>Year Received:</u>	<u>Amount Received:</u>	<u>Use of Funds:</u>
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

If your organization has sponsored this event/program in the past, please provide the following:

<u>Last Year of Event:</u>	<u>Number of Attendance:</u>	<u>Number of Tourists:</u>
_____	_____	_____

**IMPORTANT:**

Please note that a representative from your organization **must** be present at the accommodations tax advisory committee meeting to answer any questions or provide additional information needed by the committee. Failure to have a representative present at this meeting could result in your application to be dismissed without consideration.