HOTEL/ MOTEL TAX DISCRETIONARY FUND GRANT CITY OF NORTH POLE 2015 APPLICATION

The Tax on the daily rental of hotel and motel rooms levied by North Pole Municipal Code 4.09.020 and is for the primary purpose of funding services for the promotion of the tourist industry and other economic development in the City of North Pole. Applicable organizations may submit a discretionary grant application and proposal no later than the last business day of October, 2014, for fund distribution in early 2015. Applications that are not completed in full may not be considered and only one application per organization will be accepted. Requests for the following cannot be supported: loans, deficits, debt reduction, endowments, scholarships and health and social service activities. A committee may be appointed by the Mayor with City Council concurrence to review the proposals and make recommendations no later than the first regular meeting in December 2014.

Alaska Business License #	City Bus	iness License #	
Taxpayer Identification Number (ΓΙΝ)		
Are you a nonprofit under the laws	s of Alaska?	Yes	No
8			
7			
6			
5			
4			
3			
2			
1			
Current Board of Directors			
5. City	State	Zip Code	
4. Address			
3. Phone Number		_ Fax	
2. Contact person	Email		
1. Name of organization	O		
Applicant must provide the followin	g information		

Prior Hotel-Motel funding received by your organization
2014
20 13
2012
2011
Amount of funding requested for dispersal in 2015

Briefly describe the history and goals of your organization.

Identify measurable goals that will demonstrate the manner in which the proposed project or activity will promote or enhance tourism and/or contribute to the economic growth in the City of North Pole. Please show how use of the funds will contribute significantly to the growth and promotion of North Pole or will be used to supplement a successful ongoing program of activities or a new program that will need initial support to accomplish its stated goals.

Provide a budget and a brief narrative detailing the use of the funds for which the organization is applying. The total amount should match the request listed in the application.

Item	Amount

Total Amount	 	_	 	_	_	_	_	_

Narrative

Please provide the following financial information (preferably one page for each document)

- a. Balance sheet for the last fiscal year.
- b. Income and expense statement from the last fiscal year.
- c. Wage and salary information (schedule A) for all employees for current and upcoming year
- d. Projected budget for upcoming year

All successful applicants receiving grant monies from the North Pole Bed Tax fund are required to provide reports on expenditures and accomplishments of goals on forms provided by the Chief Financial Officer (CFO). Applicants who received monies in the previous year must have completed this application and filed it with the City Clerk by the last business day of October of each year.

The grant recipient agrees to acknowledge the "City of North Pole" at the sponsor level of amount received.

Signature of Agent:
Date

Please include the following Items with your submittal:

Application Balance Sheet

Bed Tax Grant Annual Report (if applicable) Income & Expense Statement

List of All Sub-grant Organizations (if applicable)

Schedule A – Wage and Salary statement

NOTE: THIS APPLICATION MUST BE RECEIVED BY THE CITY CLERK'S OFFICE NO LATER THAN 5:00 PM ON THE LAST BUSINESS DAY OF OCTOBER IN ORDER FOR THE FUNDING REQUEST TO BE CONSIDERED.

PLEASE SUBMIT THE ORIGINAL APPLICATION AND SEVEN (7) COMPLETE COPIES

Schedule A

Employee wage and salary Statement

Name of Organization	Fiscal Year End
-	

POSITION TITLES	LAST FISCAL	PROPOSED
I ODITION TITLED	YEAR	FISCAL YEAR
	ANNUAL	ANNUAL
	SALARY	SALARY

Attach Additional Pages if Necessary