



## Accommodations Tax Grant Application FY 2021-2022

NAME OF EVENT: \_\_\_\_\_

Application Deadline: Friday, April 15, 2022, 5:00 PM

Mail Completed Application to:

**Attn: Barbara J. Denny /Finance Director**  
**City of York**  
**P.O. Box 500**  
**York, SC 29745**

Date of application: \_\_\_\_\_ Amount of request: \_\_\_\_\_

Tourism Related Expenditure Category (1 – 8): (see letter of introduction): \_\_\_\_\_

***\*\*\*\*Note: Approved projects requesting funds for applicable expenditures-based on SC ATAX Law Requirements-will be funded at an 80/20% match.***

### Organization:

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

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

Tax status: (check one) \_\_\_\_\_ Tax-exempt charitable organization

\_\_\_\_\_ Governmental tax-exempt unit      \_\_\_\_\_ Church/Religious organization

\_\_\_\_\_ Other non-profit (specify status) \_\_\_\_\_

Federal Employee Identification Number (FEIN) \_\_\_\_\_

### Person Submitting Request:

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

Position: \_\_\_\_\_

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

Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_

Date(s) of project/event: \_\_\_\_\_

Briefly describe your project/event, and its goals and objectives.

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Describe how your project/event will enhance the visitor/tourist trade for the City of York.

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Have you received funding for this event from any other source?  Yes  No

If yes, please explain below:

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Total expected attendance: \_\_\_\_\_

Number of Tourist/Visitors Expected\*: \_\_\_\_\_

\*According to Section 6-4-5 (a) (4), “travel” and “tourism” mean the action and activities of people taking trips outside their home communities for any purpose, except daily commuting to and from work.

How do you measure attendance and determine how many visitors attend your event?

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Is City support required? If so, describe requirements expected including personnel (i.e. Police Department, Code Enforcement Officers) and the estimated cost of such activities. Is this cost included in this Accommodations Tax Grant request? (Rate for 1 Police/Fireman/Sanitation is \$45/hour)

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Will funding be requested on a continued basis?  Yes  No

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

List other tourism related projects/events in which the agency has been involved.

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\_\_\_\_\_  
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Provide any supplementary information you wish to have considered.

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**Required** – In addition to your project budget, you must submit a list of all members of the board, commissions or committee. If you are a non-profit, please provide a copy of your SC tax-exempt status certificate.

Provide a detailed budget showing all sources of revenues and expenditures, including the required 20% match for this project. If the event, program or project is approved and receives funding, a complete financial report of all the revenue and expenditures must be submitted within 30 days after the event, program or project is completed.

Project Budget Completed Below

Project Budget Attached

<b>REVENUES</b> (Include all relevant sources, e.g., ticket sales, sponsorships, contributions, accommodations tax, etc.)	Prior Year Amount	Current Budget Request
TOTAL REVENUES:		

<b>EXPENDITURES</b> (Include all relevant expenditures, e.g. salaries, fees, advertising, supplies, utilities, equipment, etc.)	Prior Year Amount	Current Budget Request
TOTAL EXPENDITURES:		

**STATEMENT OF ASSURANCES**

If this grant application is awarded funding,

\_\_\_\_\_ agrees that:

(Name of Organization)

1. Financial records, support documents, statistical records, and all other records pertinent to Grant funding shall be retained for a period of three years.
2. All procurement transactions, regardless of whether negotiated or advertised and without regard to dollar value, shall be conducted in a manner so as to provide maximum competition.
3. The funding recipient shall establish safeguards to prohibit employees from using their positions for a purpose that has the appearance of being motivated by a desire for private gain for themselves or others.
4. All expenditures must have adequate documentation.
5. All accounting records and supporting documentation shall be available for inspection by the City of York upon request.
6. No person, on the basis of race, color, or national origin, should be excluded from participation in, be denied the benefit of, or be otherwise subjected to discrimination under the program or activity funded in whole or part by Grant funds.
7. Employment made by or resulting from Grant funding from the City of York shall not discriminate against any employee or applicant on the basis of handicap, age, race, color, religion, sex, or national origin.
8. None of the funds, materials, property, or services provided directly or indirectly under Grant funding from the City of York shall be used for any political activity, or to further the election or defeat of any candidate for public office.

SIGNED: \_\_\_\_\_  
Applicant Authorized Official Signature

SIGNED: \_\_\_\_\_  
Signature of Witness

DATE: \_\_\_\_\_