City of Shelbyville

Grant Request Form

For a Project or Program to Promote Tourism

Purpose

The City of Shelbyville has allocated up to 10 percent of its annual income from the Restaurant Tax to fund one time projects or programs which develop and promote tourism within the city limits.

Application and Approval Process

Applications are accepted four times a year: February 1, May 1, August 1, and October 1. Decisions will be made and grants awarded within 30 days of each deadline.

To be eligible programs/projects must develop and promote tourism within the city limits. Capital improvements will be considered which enhance the beauty of the downtown defined as 3rd Street to 11th Street bound by of Washington St and Main Street. Exceptions may be granted when in the public interest.

A panel of stakeholders representing the best interests of the city will determine the amount of funds available for the round of funding, evaluate the requests and select the grantees. Priority will be given to projects which have matching funds and will be completed upon award of the grant.

Granted funds cannot be used to pay for salaries, awards, prizes or gifts. Once approved, 50% of funds will be cut and mailed. The remaining 50% will be issued upon receipt of all follow-up requirements. Any cost over the amount of the grant will be the sole responsibility of the grant/sponsorship recipient.*

Submit Applications to:

Grant Applications for Tourism Related Projects City of Shelbyville 315 Washington St. Shelbyville, KY 40065

Follow-up Requirements

Any organization receiving money under this grant/sponsorship program must submit the following, no later than 45 days after the program or project completion.

- An itemized statement showing the use of the grant including:
 - o Invoices from vendors
 - o Canceled checks showing payment
 - o Photos of the completed project or event
 - o If an event:
 - A detailed report on advertising placement
 - Statement of Attendance, including local and non-local breakdown, if possible
 - Statement indicating receipts from admission, if applicable

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Contact Name:
City, State, Zip:
Fax:
Website:
Target Audience:
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e City of Shelbyville? Yes No Unsure (Circle One)
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Non-profit status.
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CE USE ONLY
Received by:
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