

**MONROE COUNTY TOURIST DEVELOPMENT COUNCIL'S**

**OPERATIONS  
MANUAL**

**SECTION IV-B**

**CULTURAL UMBRELLA**





**MONROE COUNTY TOURIST DEVELOPMENT COUNCIL  
APPLICATION FOR CULTURAL UMBRELLA EVENT  
FUNDING**

**October 1, 2020 through September 30, 2021**

Upon evaluation of the application, the total scores will be tabulated and applications scoring 60 or more out of 100 will be considered for funding. Events that meet the minimum scoring requirements will be ranked starting with the highest score.

NAME OF PROPOSED EVENT:

(used in all advertising)

DATE(S) OF EVENT:

Refer to calendar on last page

EVENT Website:

**INDICATE THE DISTRICT(S) FROM WHICH YOU ARE REQUESTING FUNDS and THE DOLLAR AMOUNT**

**Maximum request: \$25,000**

Event must occur in the District.

	District I (encompasses the city limits of Key West)
	District II (from city limits of Key West to the west end of the Seven Mile Bridge)
	District III (from the west end of the Seven Mile Bridge to the Long Key Bridge)
	District IV (between the Long Key Bridge and Mile Marker 90.939)
	District V (from Mile Marker 90.940 to the Dade/Monroe County line and any mainland portions of Monroe County)

\$ 0.00

**TOTAL AMOUNT REQUESTED (Total Districts I-V)**

**I. EVENT PRODUCER INFORMATION** (The event producer is the organization or individual responsible for the event. In some cases, the event producer and the event are the same, for example: The Key Players. In other cases, they are different, for example: the Pigeon Key Arts Festival is the event; the Pigeon Key Foundation, Inc. is the producer.)

A. NAME OF CONTRACTING ORGANIZATION:

(Registered business name as it appears on [www.sunbiz.org](http://www.sunbiz.org) )

FICTITIOUS NAME IF USED:

ADDRESS:

TELEPHONE NUMBER: (Daytime)

CELL NUMBER:

E-MAIL ADDRESS:

FEDERAL I.D. # / E.I.N.

FLORIDA DIVISION OF CORPORATIONS DOCUMENT #

FL DEPT. OF AGRICULTURE & CONSUMER SVCS REG. #

INDICATE ORGANIZATION STATUS:

FOR PROFIT

NOT FOR PROFIT

If a person other than the President will be signing the agreement, documentation in the form of approved minutes, resolution or by-laws of the organization identifying said individual as an authorized person to sign on behalf of the organization must be provided. **It is the responsibility of the applicant to notify the TDC Administrative office of any changes to the contact information provided below.**

PRESIDENT NAME:

PRESIDENT EMAIL ADDRESS:

Please provide a contact for general correspondence for the event. The person listed below should be able to accept responsibility for receipt of information, other than the final agreement.

CONTACT PERSON:

EMAIL (for correspondence):

TELEPHONE NUMBER (Daytime/mobile):

ADDRESS:



**CULTURAL UMBRELLA EVENT BUDGET - FISCAL YEAR 2021**

**APPLICANT IS ADVISED PRIOR TO COMPLETING THIS BUDGET TO REFER TO THE ALLOWABLE MARKETING EXPENSES THAT WILL BE CONSIDERED FOR REIMBURSEMENT**

**THERE WILL BE NO AMENDMENTS TO THIS BUDGET AFTER BOCC APPROVAL OF THE AGREEMENT.**

**EVENT NAME:**

*MEDIA PLACEMENT & PRODUCTION COST: (Only 30% of this line item may be spent on in-county advertising)	
PROMOTIONAL SIGNS:	
PROMOTIONAL ITEMS:	
DIRECT MAIL PROMOTIONS:	
PROGRAMS/PLAY BILLS:	
PUBLIC RELATIONS:	
**GENERAL NON-ALLOCATED: (Funds applied to Media Placement & Production Cost may only be applied to out-of-county advertising)	
<b>TOTAL</b>	<b>\$ 0.00</b>

\*No more than **30%** of the Media Placement and Production Costs line item shall be expended on advertising media costs attributable to in-county placement.

\*\*The General Non-Allocated line item may not exceed 15% of the total funding allocation, and may only be utilized for allowable event marketing expenses other than in county media placement.

Actual expenditures may deviate no more than 10% from the budgeted line items noted above.

**Please note:** The TDC will only consider reimbursement of allowable marketing expenditures that highlight the special event versus the regular programming of a business, organization or the facility.





**4. Direct Mail Promotions: REQUESTED**

**5. Programs/Playbills: REQUESTED**

**6. Public Relations:** Identify the agency or PR professional who will prepare this PR.  
**REQUESTED**

**7. General/non-allocated funds: REQUESTED**

**TOTAL REQUESTED: \$ 0.00**

## PART 3: SCORED PORTION OF THE APPLICATION: EVENT NAME:

### I. PROPOSED EVENT INFORMATION -- Based on Schedule of Activities (page 3)

**A. MONTH(s) OF EVENT Activities: Please check the appropriate month. If an event takes place over a series of months the scores will be added to a maximum of 7 points.**

October	4	<input type="checkbox"/>	April	1	<input type="checkbox"/>
November	4	<input type="checkbox"/>	May	4	<input type="checkbox"/>
December	3	<input type="checkbox"/>	June	4	<input type="checkbox"/>
January	2	<input type="checkbox"/>	July	4	<input type="checkbox"/>
February	1	<input type="checkbox"/>	August	6	<input type="checkbox"/>
March	1	<input type="checkbox"/>	September	6	<input type="checkbox"/>

**Score: 1 2 3 4 5 6 7**

### B. NUMBER OF DAYS -- Based on Schedule of Activities (page 3)

Please check the appropriate range.

1-14 days  4      15-120 days  5      121-365 days  6

**Score: 4 5 6**

**C. ATTENDANCE** Number of people anticipated to attend the event, the number attending this current year, and actual past attendance:

Total Attendance for Events

	Anticipated 10/1/2020 - 9/30/2021	Current 10/1/2019 - 9/30/2020	Actual 10/1/2018 - 9/30/2019
Monroe County Residents			
Out of County			
<b>TOTAL</b>			

**DETERMINATION OF ATTENDANCE FOR EVENTS** DESCRIBE YOUR AUDIENCE: How do you determine your numbers, please mention walk-ins, how you count, how you ask county/out of county?

**II. STATEMENT OF INCOME & EXPENSE for the EVENT:**

The figures for the last completed year (right column) should be actual. The other years should be your best estimates for the income and expenses of the events that match what is listed in the Schedule of Activities for the grant year (left column) – and comparable events in the current year (middle column). These are budget numbers for 12 months in each fiscal year.

**EVENT NAME:**

**EVENT INCOME**

<b>EVENT INCOME</b> (DO NOT INCLUDE IN-KIND) Use October 1 – September 30	PROPOSED FY 2021	CURRENT ESTIMATE FY 2020	ACTUAL FY 2019
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EVENT INCOME (DO NOT INCLUDE IN-KIND) Use October 1 – September 30	PROPOSED FY 2021	CURRENT ESTIMATE FY 2020	ACTUAL FY 2019
A. CULTURAL UMBRELLA FUNDS	*	**	***
ENTRY/ADMISSION/BOX OFFICE			
PROMOTIONAL ITEMS			
FOOD & BEVERAGE			
SPONSORS/CONTRIBUTIONS			
MEMBERSHIPS			
GRANTS – State & Local			
OTHER			

<b>B. TOTAL EVENT INCOME</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>
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**\* Requested**

\*\* As Contracted with the TDC

\*\*\*As Reimbursed by the TDC

Cultural Umbrella funds for the proposed FY are 0% of Total Income.(A divided by B x 100)

Did you receive a Cultural Umbrella Grant in 2017-2018?  YES  NO

How much were you awarded?

How much were you reimbursed?

**EVENT NAME:**

**EVENT EXPENSES**

	PROPOSED FY 2021	CURRENT FY 2020	ACTUAL FY 2019
EVENT OPERATING EXPENSES – (use October 1 – September 30)			

<b>C. CULTURAL UMBRELLA FUNDS *</b>			
<b>D. MARKETING/ADVERTISING ADDITIONAL TDC ALLOWABLE</b>			
<b>E. MARKETING/ADVERTISING ADDITIONAL TDC <b>NON</b>-ALLOWABLE</b>			
EVENT OPERATING EXPENSES			

<b>F. TOTAL EVENT EXPENSES</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>
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NET PROFIT/LOSS (B minus F)	\$ 0.00	\$ 0.00	\$ 0.00
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**Cultural Umbrella Funds % of Total Allowable Advertising%**

**C divided by (C+D) x100**

Please note: Line A and Line C must match

NARRATIVE (optional)

**Score: 0 – 7**

## Cultural Umbrella Final Grant Report for 2018-2019

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

Grant Year 2018-19. Grant in this grant year?  yes  no

If no, stop here. If yes, complete form

Grant #: \_\_\_\_\_

Grant Award Amount: \_\_\_\_\_

Executed/Reimbursed Amount: \_\_\_\_\_

Difference (unreimbursed balance\*) : \_\_\_\_\_

NARRATIVE 1: EXPLANATION of the Unreimbursed Balance\* (100 WORDS):

NARRATIVE 2: PROPOSED IMPROVEMENTS TO THE PROCESS: (100 WORDS)

### III. HOW THE PROPOSED EVENT WILL ENCOURAGE TOURISM

**NARRATIVE:** For the TDC supported events/activities listed in Schedule of Activities, explain why you think your PROPOSED event(s), and supporting activities will help draw people from outside of Monroe County, or encourage them to extend their stay.

Please do **not** assume the reader/scorer is familiar with your event. Walk us through your ***proposed*** event(s) for the award period. (LIMIT 750 WORDS)

**Score: 0 - 30**

#### **IV. MARKETING YOUR EVENT OUTSIDE MONROE COUNTY**

For the TDC supported events/activities listed in Schedule of Activities: Describe **all plans** to market the event(s) to reach visitors **outside** of Monroe County. Include all marketing activities (TDC financed and all other). Be specific: how will you **EXPAND** your own plan with the requested TDC/Cultural Umbrella funds. Explain the benefit of TDC Marketing (LIMIT 750 WORDS)

**Score: 0 - 25**



**PART 5: EVENT SUSTAINABILITY ACTION PLAN – Please answer A - E.**

Our visitors come to enjoy events, but in the process, a tremendous amount of waste is generated, much of it recyclable. The single most effective tool in reducing waste at special events is planning ahead

A. Encourage recycling message within programs and brochures to recycle during the event and also at home.

B. Encourage “Green” advertising (broadcast and digital).

C. Encourage vendors to use biodegradable/compostable products (utensils; plates and cups; paper or canvas bags).

D. Encourage the use of clearly identified recycling containers.

E. Discourage use of single use plastic bags and other products.

