



CITY OF BRILLION

ROOM TAX APPLICATION FORM

PLEASE RETURN YOUR APPLICATION AND  
SUPPORTING INFORMATION TO:

CITY OF BRILLION  
130 CALUMET STREET  
BRILLION, WI 54110

## **INFORMATION FOR CITY OF BRILLION ROOM TAX FUNDING REQUESTS**

The City of Brillion's Room Tax Funding program has been established to encourage and promote programs, services and facilities which directly benefit the residents in the City of Brillion.

The City of Brillion Tourism Committee (Tourism Committee) will consider funding requests which clearly show benefits to the City of Brillion in the following categories:

1. Marketing projects, including advertising media buys, creation and distribution of printed or electronic promotional tourist materials, or efforts to recruit for special events;
2. Transient tourist informational services;
3. Tangible municipal development projects; and
4. Tourism events.

All room tax funding recipients must comply with all Federal, State, and Local regulations regarding nondiscrimination and operate within the affirmative action policy.

### **PROGRAM REVIEW:**

The Tourism Committee and/or the Brillion City Council reserves the right to deny any and all requests received.

Room Tax Applications shall be reviewed and ranked by members of the Tourism Committee. The committee may conduct brief interviews with the eligible applicants. The committee's recommendations will be submitted to the Common Council for final funding authorization.

If you have any questions, please contact the Community Development Director at City Hall at (920)-756-2250.

# CITY OF BRILLION ROOM TAX APPLICATION

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

Date: \_\_\_\_\_

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

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

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

## **Event or Organization Description:**

Location of Event/Project: \_\_\_\_\_

Dates of the Event: \_\_\_\_\_ Anticipated Project Completion: \_\_\_\_\_

Geographic Area Served: \_\_\_\_\_

Projected Attendees Served: \_\_\_\_\_

Target Market/Attendees (indicate characteristics such as: families, youth, adults, seniors):

\_\_\_\_\_

Legal Status of the Organization: \_\_\_\_\_

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## **FUNDING TYPE:**

\_\_\_\_\_ Existing Event: (How many years has it existed? \_\_\_\_\_)

\_\_\_\_\_ New Event

\_\_\_\_\_ One time/One of A Kind Request

\_\_\_\_\_ Other Type of Request (Describe: \_\_\_\_\_)

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## **FUNDING REQUEST:**

Room Tax Request Amount: \$ \_\_\_\_\_

Total Project/Event Budget: \$ \_\_\_\_\_

Total Organization's Operating Budget: \$ \_\_\_\_\_

**EVENT/PROJECT OBJECTIVE:**

- \_\_\_\_\_ Marketing projects, including advertising media buys, creation and distribution of printed or electronic promotional tourist materials, or efforts to recruit for special events
  
  - \_\_\_\_\_ Transient tourist informational services
  
  - \_\_\_\_\_ Tangible municipal development projects
  
  - \_\_\_\_\_ Tourism events
- 

Define your program goals and objectives in specific terms and methods to monitor the success of the objectives: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Provide a detailed schedule of activities:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Describe any cooperative activities among other agencies participating in this project. Be specific in defining agency roles and contributions. (You may attach commitment letters from these agencies): \_\_\_\_\_

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Explain the effect **NOT receiving** a Tourism Grant will have on your project:

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**DON'T FORGET TO SUBMIT THE ADDITIONAL DOCUMENTS!!!**

- Project Budget and Related Budget Documents
- If the organization is a not-for-profit, submit a copy of the IRS determination letter establishing your "Not for Profit" status.