

FRANKLIN COUNTY

DESTINATION DEVELOPMENT & MARKETING FUND

PROGRAM APPLICATION

Through the Franklin County Destination Development & Marketing Fund (DDMF), the Franklin County Local Development Corporation (FCLDC) provides grants to municipalities, non-profit organizations and businesses to undertake or support projects and activities that increase recreational, tourism or cultural visits to the county or that enhance the visitor experience. The fund is capitalized by FCLDC and Franklin County. Funding through FCDDMF is available for projects in the categories of Destination Development and Marketing.

Visit www.franklinida.org/DDMFund to find guidelines and frequently asked questions. Please review the Fund guidelines for details on requirements and criteria. This is a competitive grant program and the purpose of this application is to collect the information necessary to determine whether a proposed project (1) has the potential to make a meaningful impact on program goals, and (2) can meet program criteria and minimum requirements. It is the responsibility of the applicant to provide accurate and complete information with this application. Applications will be reviewed, and awards determined on a monthly basis by the DDMF Committee.

Applicants must schedule an in-person meeting with FCLDC staff prior to submitting an application and must receive approval to submit an application before a project will be considered for funding.

Upon notice of funding award the applicant must work with FCLDC to complete project design and scope, finalize budget, obtain necessary approvals, and complete contracts.

Application Submission Instructions	
1.	Applications must be completed as a fillable .pdf using Adobe Acrobat, Adobe Acrobat Reader or another compatible application that includes an electronic signature tool. Adobe Acrobat Reader DC may be downloaded for free at https://get.adobe.com/reader/ . Handwritten applications will not be accepted.
2.	The signature field in the Certification Section must be completed using the Signature Tool in Adobe Acrobat, equivalent tools available in other applications, or hand-initialed, hand-signed, and scanned.
3.	The application form and all attachments must be submitted via web form at http://tinyurl.com/ddmfapp . The web form allows attachments to be uploaded separately. All attachments must be uploaded in .pdf format.
4.	Applications not approved are eligible to reapply after receiving feedback from the review committee.

GENERAL INFORMATION			
<i>Instructions: Complete <u>all</u> applicable fields.</i>			
Organization or Business Name, if applicable:			
Applicant Name or Contact Person Name, if organization:			
Address:			
City:	State:	Zip:	
Phone 1:	Type:	Phone 2:	Type:
Email:			

Project Location, if applicable:		
Address:		
City:	State:	Zip:

PROJECT DESCRIPTION

Instructions: Describe your project in detail including:

- *What you are proposing to do (e.g. build something, hold an event, purchase equipment, etc.)*
- *Generally describe the amount of grant funds you are seeking and how the funds will be used to do what you are proposing*
- *Why this grant funding is necessary to accomplish your project and what it would mean to you*

SCORING CRITERIA

Instructions: Please refer to the Fund guidelines for detail on scoring. This is a competitive grant program and the project will be scored and ranked against scoring criteria. Projects will be scored on (1) **Project Impact**, (2) **Project Alignment**, (3) **Project Quality**, (4) **Alignment with Local & Regional Plans Readiness**, and (5) **Project Budget**.

In the sections below, describe in detail how the project promotes or contributes to each scoring category and meets category criteria. Attach additional pages if necessary.

PROJECT IMPACT

How does your project:

- *Generate amenities and quality of life improvements for the local community?*
- *Expand on, complements, and enhances existing tourism-related amenities and offerings?*
- *Increase visitation, especially overnight visits, or enhances the visitor experience?*
- *Generate economic benefits (e.g. increased sales, lodging revenue growth, occupancy tax revenues, sales tax revenues, etc.)*
- *Benefit local businesses through purchases of local products and services?*
- *Identify performance measures for project impacts above? (i.e. How do you plan to track impact? How will you measure outcomes ("We expect to increase attendance by..." "We will expand our reach to xxx persons in xxx market...", "We expect to bring xxx visitors, xxx of them overnight.")*

PROJECT ALIGNMENT

How does your project:

- *Align and integrate with local, regional and state destination development and destination marketing priorities, plans, goals, and strategies? (Plans can be found at www.franklinida.org/DDMFund.)*
- *Align with community and regional brand, culture, and environment?*
- *Not duplicate or replace existing regional or local destination marketing efforts?*

PROJECT QUALITY

Does your project:

- *Represent a new activity, event or physical improvement or clear expansion of existing activity, event or physical improvement?*
- *Replace normal business marketing or routine maintenance?*
- *Have a plan to maintain the project over time?*
- *Demonstrate a commitment to providing a high-quality product, service, or experience?*
- *Create an unfair competitive disadvantage to other local businesses?*
- *Have a reasonable project timeline to be completed in less than one year?*

PROJECT BUDGET

- Please refer to the Fund guidelines for eligible expenses.
- Minimum award amount is \$500. Maximum award amount is \$5000
- Grants cannot exceed 50% of the total project cost.
- You may attach a separate budget, but it must be broken down into these categories and include the information requested below.

Budget evaluation criteria:

- Is the project financially and organizationally sustainable
- The amount of match as a percentage of total project cost
- Evidence of match and resources to complete projects
- Clear budget of project costs

Budget Component	Estimated Cost
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16.	
Total Project Cost:	
Grant Request:	
<i>(Total Project Cost – Grant Request)</i> Applicant Match:	
<i>(Grant Request / Total Project Cost; cannot exceed 50%)</i> Grant Request Percentage:	

Additional Budget Notes:

PROJECT TIMELINE

Instructions: Provide a project timeline. List each major milestone and the month it will completed. Provide additional explanation as necessary.

Milestone	Completion Date
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
Explanation:	

ATTACHMENTS

Instructions: Attach any documentation that supports the application. Attachments may be uploaded as separately or combined but all attachments must be uploaded in .pdf format.

Information that <u>may</u> be submitted with application (Check all that apply):	✓
Business or Marketing Plan (if applicable)	<input type="checkbox"/>
Cost estimates for any components of proposed project budget	<input type="checkbox"/>
Pictures or plans for project (if applicable)	<input type="checkbox"/>
Letters of support (if applicable, not required)	<input type="checkbox"/>
Additional pages for application questions (label each by question #)	<input type="checkbox"/>
Other:	<input type="checkbox"/>

CERTIFICATION

I hereby certify that all information, which has been or will be furnished in support of this application, is given for the purpose of obtaining funds through the Franklin County Destination Development & Marketing Fund and that all information submitted has been examined and approved by me and is true, correct, and complete. I understand that this information will be used to assess and rank my proposed project in accordance with funding criteria. I agree to abide by all requirements to be set forth in connection with said program and the penalties and provisions of all applicable local, state, and federal laws pertaining to falsification of any item contained herein or fraudulent misrepresentation of my business. I understand that this is a competitive award program and that my project may not be awarded funding. I agree that verification of any information contained herein may be obtained.

Applicant Name

Applicant Signature

Date