



**COUNTY OF GREENVILLE**  
**ACCOMMODATIONS TAX FUNDING**  
**APPLICATION**  
**FISCAL YEAR 2009-2010**

1) Name of Project: \_\_\_\_\_

2) Amount of Funds Requested: \$ \_\_\_\_\_

3) Sponsoring  
Organization: \_\_\_\_\_

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

4) Federal Tax ID #: \_\_\_\_\_

5) Contact Person:

Name \_\_\_\_\_ Title \_\_\_\_\_

Telephone \_\_\_\_\_ Alt. Telephone No. \_\_\_\_\_

Email \_\_\_\_\_ Fax No. \_\_\_\_\_

6) Project Timeline ~ Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_  
MONTH/DAY/YEAR MONTH/DAY/YEAR

7) Location of Project or Event: \_\_\_\_\_

8) How many people do you expect to attend? \_\_\_\_\_

9) Of this number, how many are tourists? \_\_\_\_\_ (Tourists: *"People taking trips outside their home communities for any purpose, except daily commuting to and from work."* ) [SC ST SEC 6-4-5 (4)] .

10) Project Budget:

a. AMOUNT OF FUNDS REQUESTED WITH THIS APPLICATION: \$ \_\_\_\_\_

b. This request equals what percent of the total Project Budget? \_\_\_\_\_%



**11) Has your project or organization previously received Accommodations Tax Funding?**

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

a. If yes, state year \_\_\_\_\_, amount \$ \_\_\_\_\_, source \_\_\_\_\_,  
and purpose: \_\_\_\_\_

b. For the last year you received County Accommodation Tax Funding, the  
number that attended your event was \_\_\_\_\_ of which \_\_\_\_\_ were tourists.

c. For each award year, did you expend 100% of the Accommodations Tax Funds  
you received? \_\_\_\_\_ Yes                      \_\_\_\_\_ No

If not, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**10) Type of Organization:**

IRS Designation: \_\_\_\_\_ 501 ( c ) 3 ;                      \_\_\_\_\_ Other (specify)

Please Check One:

- Government agency, board, commission or political subdivision
- Non-Profit Organization
- A community service club, church, etc.

**11) Date Funds are Needed:** \_\_\_\_\_

**12) Project Description: (Please attach additional pages as necessary.)**

a. General Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**b. State the benefit that this project will serve toward promoting tourism and the Greenville County Community:**

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**c. Estimated Number of Tourists your event will attract:** \_\_\_\_\_

**d. Permits Required:** \_\_\_\_\_

**e. Additional Comments:** \_\_\_\_\_

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\_\_\_\_\_  
**Signed**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Title**

**ORIGINAL AND 8 COPIES OF APPLICATION DUE BY:**

**3:00 P.M. ON MONDAY FEBRUARY 16, 2009**

**NADINE CHASTEEN, CPPB, CPPO, DIRECTOR  
PROCUREMENT SERVICES DIVISION  
COUNTY OF GREENVILLE  
301 UNIVERSITY RIDGE, SUITE 100  
GREENVILLE, SC 29601-3660**

**QUESTIONS SHOULD BE SUBMITTED TO:**

**NADINE CHASTEEN: (864) 467-7207 – EMAIL: [nchasteen@greenvillecounty.org](mailto:nchasteen@greenvillecounty.org)**

**BECKY VIRES: (864) 467-7203 – EMAIL: [bvires@greenvillecounty.org](mailto:bvires@greenvillecounty.org)**