



# Hotel Occupancy Tax

## Program Year 2019

## Application

MUST BE TYPED or PRINTED

DELIVER TO:

City of Rockwall Finance Office  
Attn: Lea Ann Ewing  
385 S. Goliad St., Rockwall, TX 75087  
972-771-7700 [lewing@rockwall.com](mailto:lewing@rockwall.com)

**Organization Name:**

Name of Event:

Date(s) of Event:

Funding Request \$:

Website Address:

Mailing Address:

Physical Address:

Telephone:

Fax:

**Primary Contact Name:**

(Project Director)

Mailing Address:

Email Address:

Telephone:

Fax:

**Secondary Contact Name:**

(President/Board Chairman)

Mailing Address:

Email Address:

Telephone:

Fax:

- ▶ COMPLETE AN APPLICATION FOR EACH EVENT/PROGRAM/EXHIBIT REQUESTING FUNDS
- ▶ INCOMPLETE APPLICATIONS WILL NOT BE FORWARDED TO THE COUNCIL SUBCOMMITTEE

- |                          |  |                                    |
|--------------------------|--|------------------------------------|
| <input type="checkbox"/> | <b>Advertising/Tourism</b>   | <b>Requested funding amount \$</b> |
|                          | Conducting solicitation or promotional programs that encourage tourists and delegates to come to the City of Rockwall.   |                                    |
| <input type="checkbox"/> | <b>Arts</b>  | <b>Requested funding amount \$</b> |
|                          | Providing encouragement, promotion, improvement and application of the arts as it relates to the presentation, performance execution or exhibition of the major art forms in the City of Rockwall. |                                    |
| <input type="checkbox"/> | <b>Historical</b>  | <b>Requested funding amount \$</b> |
|                          | Providing historical restoration, preservation, programs and encouragement to visit preserved historic sites or museums located in the City of Rockwall.   |                                    |

- [illegible]

7. What specific market will you target with the event/program's marketing plan? Attach up to 3 examples and evidence of marketing area and readership (Label Exhibit C).
8. The City of Rockwall must require segregated accounting of its Hotel funds. Organizations must maintain and account for revenue provided from the tax authorized by section 351.101(a) within one of the two options listed below.
- a) Separate checking account without combining with any other revenues or maintained in any other bank account or
  - b) Maintain a line item accounting, whereby the Hotel revenues may not be combined with any other revenues or expenditures. The funds may be maintained in the same bank account, provided they are reported as a separate line item in the organization's budget. Interest earned on the Hotel revenues must be used to support the event/program as well.

Will the organization be able to segregate the accounting process in either a) or b) above?                      Yes

9. Provide all of the following documentation with this application and label each as outlined below.

Exhibit A	Proposed budget for each event/program using attached form
Exhibit B	Letter of determination certifying federal tax exempt 501(c)(3) status
Exhibit C	Examples and evidence of marketing area and readership (limit 3)
Exhibit D	List members of the governing body including name, position, mailing address and phone number
Exhibit E	W-9 Form <a href="https://www.irs.gov/pub/irs-pdf/fw9.pdf?">https://www.irs.gov/pub/irs-pdf/fw9.pdf?</a>
Exhibit F	Form 1295 <a href="https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm">https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm</a>

*We certify, to the best of our ability, that the information in this application, including all exhibits and supporting documentation is true and correct to the best of our knowledge. It is understood and agreed that any funds awarded as a/ result of this application will be used for the purpose set for herein and the program guidelines.*

President/Board Chairman:

Date

Print Name

\_\_\_\_\_  
Signature

Event/Program Director:

Date

Print Name

\_\_\_\_\_  
Signature

Both signatures are required for application to be considered complete.

**EXHIBIT A****Hotel Occupancy Tax Funding Request  
Event/Program Budget - Program Year 2019**

Financial information (round to the nearest dollar). Include a completed copy of this budget with funding request.

Organization Name: \_\_\_\_\_  
 Event/Program Name: \_\_\_\_\_  
 Requested Funding: \$ \_\_\_\_\_

<b>Expenses (for this project only)</b>		Total Expenses	HOT Funds Request		
1. Personnel					
Administrative					
Artistic					
Technical					
Other personnel					
2. Fees for outside professional service					
Administrative					
Artistic					
Technical					
3. Space Rental					
4. Equipment Rental					
5. Travel/Transportation					
6. Promotion/Printing					
7. Costumes/Royalties					
8. Other (supplies, postage etc.)					
9. Sub -Totals					
10. Total Expenses					

Total Revenues					
<b>Revenues (for this project only)</b>					
1. Total Amount of HOT fund request					
2. Admissions (ticket and concessions)					
3. Donations					
4. Organizational funds budgeted					
5. Grants (State)					
6. Other (list):					
7. Other (list):					
8. Other (list):					
9. Other (list):					
10. Total income and contributions					
11. Total In-Kind					
12. Total Revenues					

<b>Financial Information (for this project only)</b>					
Fiscal Year (Oct 1 <sup>st</sup> – Sept 30 <sup>th</sup> )		2016 actual	2017 actual	2018 actual	2019 Projected
Total Revenues					
Total Expenses					
Total Hotel funds awarded					