KITSAP COUNTY LODGING TAX FUNDING AWARD APPLICATION

Application Deadline: August 30, 2024 @ 2:00 pm

Project Title: Project Dates: Beginning:	Ending:	
Name of Organization	Web Site	
Mailing Address:		
Contact Person:		e:
Amount Requested: \$	Total Project Cost: \$	
Portion of Total Project Cost Requested:	,	(%)
Signature of Authorized Representative		
Indicate the Project Type:		
□ Tourism marketing;		
 Marketing and operations of special even 	ents and festivals designed to attract to	urists;
 Operations and capital expenditures of 		operated by a
municipality or a public facilities district;		
 Operations of tourism-related facilitie 	s owned or operated by nonprofit	501(c)(3) and
501(c)(6) organizations.		
Applicants Must Submit The Following: Application Funding Cover Sheet si Project Description Scope of Work Project Timeline Project Budget Project/Organizational History Business Qualification Tax Information Certificates of Insurance	gned by an Authorized Representative	
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If these basic criteria are not met, the appli Committee.	cation will not be considered by the Lod	lging Tax

Questions?
Contact Glen McNeill at (360) 337-4789 or gsmcneill@kitsap.gov
Kitsap County Administrative Services
614 Division St., MS-7
Port Orchard, WA 98366