



Received _____ #19-_____

CITY OF DONNELLY LOCAL OPTION TAX "LOT" FUNDING APPLICATION OCTOBER 1, 2018 – SEPTEMBER 30, 2019

Applicant: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Contact Name: _____ Title: _____

Phone: _____ Email: _____

If allocation is granted, make check payable to: _____

Organization Type: Circle One For Profit Non-Profit Other: _____

Project Name: _____

Amount Requested: _____

Proposed Project Start Date: _____ Proposed Completion Date: _____

(Start dates must fall with FY18 – October 1, 2017 through September 30, 2018)

Current Sources of Funding: _____

- Copies must be submitted:
- W-9 Form
 - Proof of State of Idaho Business Entity Registration
(to apply, contact the Secretary of State's Office at 208-334-2301. For proof of registration, go to www.accessidaho.org)
 - Profit and Loss Statement

This Request fall under the qualifying category of: _____

Please explain why: _____

Funds will be specifically spent as follows (attach additional page, if needed, to describe project):

Submitted by: _____ Date: _____

Signature: _____