

## CITY OF DONNELLY LOCAL OPTION TAX "LOT" FUNDING APPLICATION FY25

Due Date: April 11, 2024

Applications will only be accepted by email: <a href="mailto:lclemens@cityofdonnelly.org">lclemens@cityofdonnelly.org</a>
Failure to submit a completed application could result in the application not receiving funding.

Applicant:				
Mailing Address:				
City:	State:		Zip Code:	
Contact Name:			Title:	
Phone:		Email:		_
If allocation is granted, ma	ke check payab	ole to:	_	
Organization Type: Circle C	One for Profit	Non-Profit	Governmental Entity	
Other: (inclu	ude proof author	ized to conduc	t business in Idaho)	
Project Name:			_	
Amount Requested:				
Proposed Project Start Dat	:e:	Proposed	Completion Date:	
(Start dates must fall with	the forthcomin	g Fiscal Year v	vhich begins October 1	st)
Current Sources of Funding	g:			
Copies must be submitted	☐ Proof of S (to apply, co registration,	State of Idaho entact the Secretar , go to <u>www.acc</u>	Business Entity Registory of State's Office at 208-334- cessidaho.org) Statement and Balance	2301. For proof of
This Request fall under the	qualifying cate	egory of (3.10	.050 Purpose of Tax Re	venues)
Circle One:				

- A. New paving, parking, bike paths, public transit and transportation;
- B. Matching funds to leverage grant funding;
- C. Public safety;

- D. Parks and land acquisition for new park facilities;
- E. City beautification including but not limited to, open space acquisition, streetscapes, burial of overhead utility lines;
- F. Recreational and cultural activities and facilities including, but not limited to, library, community art and cultural events;
- G. Animal shelter support;
- H. Economic Growth, marketing, advertising, promotion and development;
- I. Capital Improvements; and
- J. Direct costs to collect and enforce the tax.

Explain in detail how this request complies with the public purpose/s you have identified:
Funds will be specifically spent as follows (attach additional page, if needed, to describe project):
Process for Receiving Allocated Funds:
<ol> <li>Allocated Funds Upfront – sign Agreement then complete Final Award Report upon completion of project.</li> </ol>
<ol> <li>Reimbursement of Allocated Funds – show project receipts and completed Final Award Report.</li> </ol>
All Ads/Communication to include mention of funding by City of Donnelly Local Option Tax
I certify that the information herein contained and attached is true and correct on behalf of the requestor:
Submitted by:Date:
Signature:
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