



LLANO COUNTY TREASURER

Cheryl Regmund

P.O. Box 367 | 100 W Sandstone Street
Llano, Texas 78643

Llano County HOT Grant Application

Organization/Business Information:

Please type or print neatly.

Today's date: _____

Name of Organization/Business: _____

Organization founding date: _____ Tax ID #: _____

Is your organization/business: Non-Profit _____ Private/For Profit _____ (check one)

Mailing Address (including City, State, Zip code): _____

Contact Name _____ Contact Phone: _____ E-mail: _____

Contact Name _____ Contact Phone: _____ E-mail: _____

Purpose and/or Mission Statement of your organization/business: _____

Event or Project Description: *Please answer all items that apply to your request.*

Are you applying for an Event or a Project? _____

Name of your event or project: _____

Date(s) of your event or project: _____

Primary location of event or project: _____

Website address for your event or project: _____

How will the event or project promote tourism in Llano County? _____

Amount of funding requested: _____

How will the funds be used? _____

Llano County HOT Grant Application, continued

Do you intend to pursue other grant/ sponsorship agreements to support this event or project? _____

If yes, please list along with amount(s) being requested: _____

Are grant funds required prior to beginning your project or the event date? _____ (yes/no)

For events only:

Approximate number of lodging room-nights that are anticipated to stay overnight in an unincorporated Llano County Lodging facility _____

Approximate number of lodging room-nights that are anticipated to stay overnight in an incorporated Llano County Lodging facility _____

How do you plan to measure overnight stays? _____

Required Attachments Checklist:

_____ Form W-9

_____ Itemized Budget relevant to HOT revenues used, including revenues and projects

_____ Advertising/Marketing Plan, including target audience.

_____ List of current Board of Directors with complete contact information.

_____ Event/Marketing timeline.

_____ Any other information you feel will support your application

We agree to use all funding from the Llano County Hotel Occupancy Tax only as specifically stated in this application and that any unused funds will be returned to the Llano County Treasurer.

We agree to submit a follow-up report within 60 days following the event or finishing the project.

Signature and Title

Date

Printed name