

Buncombe County Tourism Development Authority

Tourism Product Development Fund

2014 Grants Cycle - Phase II Application

APPLICATION SUBMISSION INSTRUCTIONS

1. Please provide complete information in response to each question. Do not skip questions. If you are unable to answer a question or if a question is not applicable to your project, please briefly describe why it cannot be answered.
2. Type your answers in the fields provided. Handwritten applications will not be accepted. Please limit your answers to the space provided.
3. Attachments are required for several questions. Please enter the file name for each attachment in the field provided and attach the files to the email along with your application. All submitted files must be sent in one email, or hand delivered in one packet.
3. Submit your application to Pat Kappes via email at pkappes@ExploreAsheville.com or in person at 36 Montford Avenue, Asheville, NC 28801.
4. Applications must be received **no later than Wednesday, August 20, 2014 at 5 p.m. EST.**

APPLICATION SECTIONS

- | | |
|--------------------------------|--------------------------------|
| I. ORGANIZATION INFORMATION | VI. DESTINATION BRANDING |
| II. PROJECT INFORMATION | VII. CURRENT TOURISM IMPACT |
| III. RETURNING APPLICANTS ONLY | VIII. SUPPLEMENTAL INFORMATION |
| IV. IMPACT OF YOUR PROJECT | IX. APPLICANT AGREEMENT |
| V. FINANCIAL INFORMATION | |

I. ORGANIZATION INFORMATION

Name of Project:

Organization: Tax Status:

Address:

City: State: Zip: Phone:

Physical Address of the Project (if different):

City: State: Zip:

PRIMARY CONTACT

Name of Applicant: Email:

Address:

City: State: Zip: Phone:

I. ORGANIZATION INFORMATION, continued - Page 2

1. What is your organization's mission?

A large, empty gray rectangular area intended for the user to write their organization's mission statement.

2. Briefly describe the history of your organization.

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I. ORGANIZATION INFORMATION, continued - Page 3

3. Identify and describe any pending legal action against you or your organization. If none, enter "N/A."

[Empty text area for pending legal action]

4. Identify the key leadership of your organization/project and include a description of their role in your project.

Name: [] Primary Company/Organization: []
Role: []

Name: [] Primary Company/Organization: []
Role: []

Name: [] Primary Company/Organization: []
Role: []

Name: [] Primary Company/Organization: []
Role: []

Name: [] Primary Company/Organization: []
Role: []

Name: [] Primary Company/Organization: []
Role: []

5. Identify any additional leadership individuals associated with your organization/project.

[Empty text area for additional leadership individuals]

I. ORGANIZATION INFORMATION, continued - PAGE 4

6. If applicable, identify the current members of your board or advisory committee.

Name:		Primary Company/Organization:	
Name:		Primary Company/Organization:	
Name:		Primary Company/Organization:	
Name:		Primary Company/Organization:	
Name:		Primary Company/Organization:	
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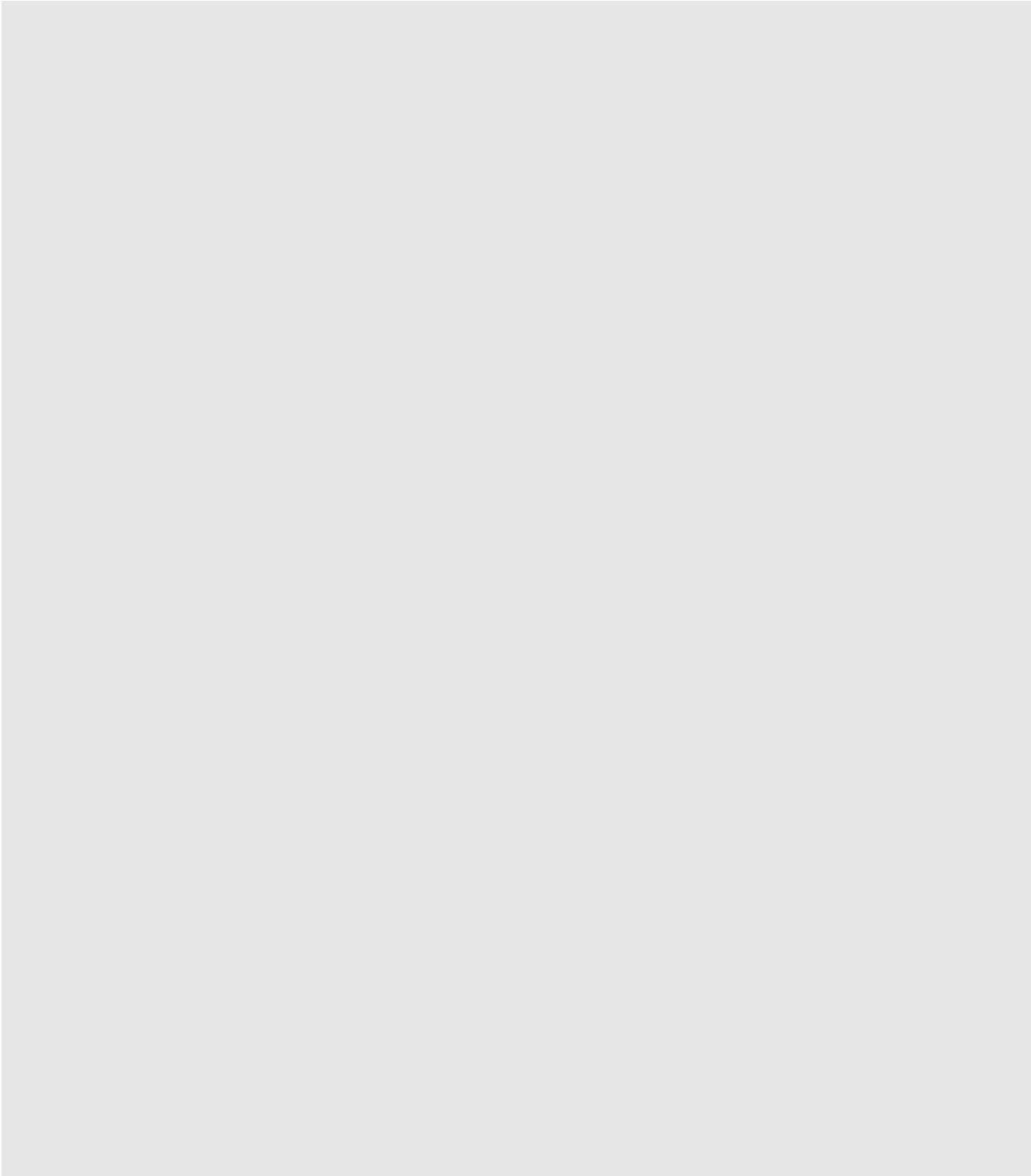
7. Additional board members or advisory committee members:

8. If applicable, identify any current partnerships your organization holds with other regional organizations.

Include name of organization and nature of partnership.

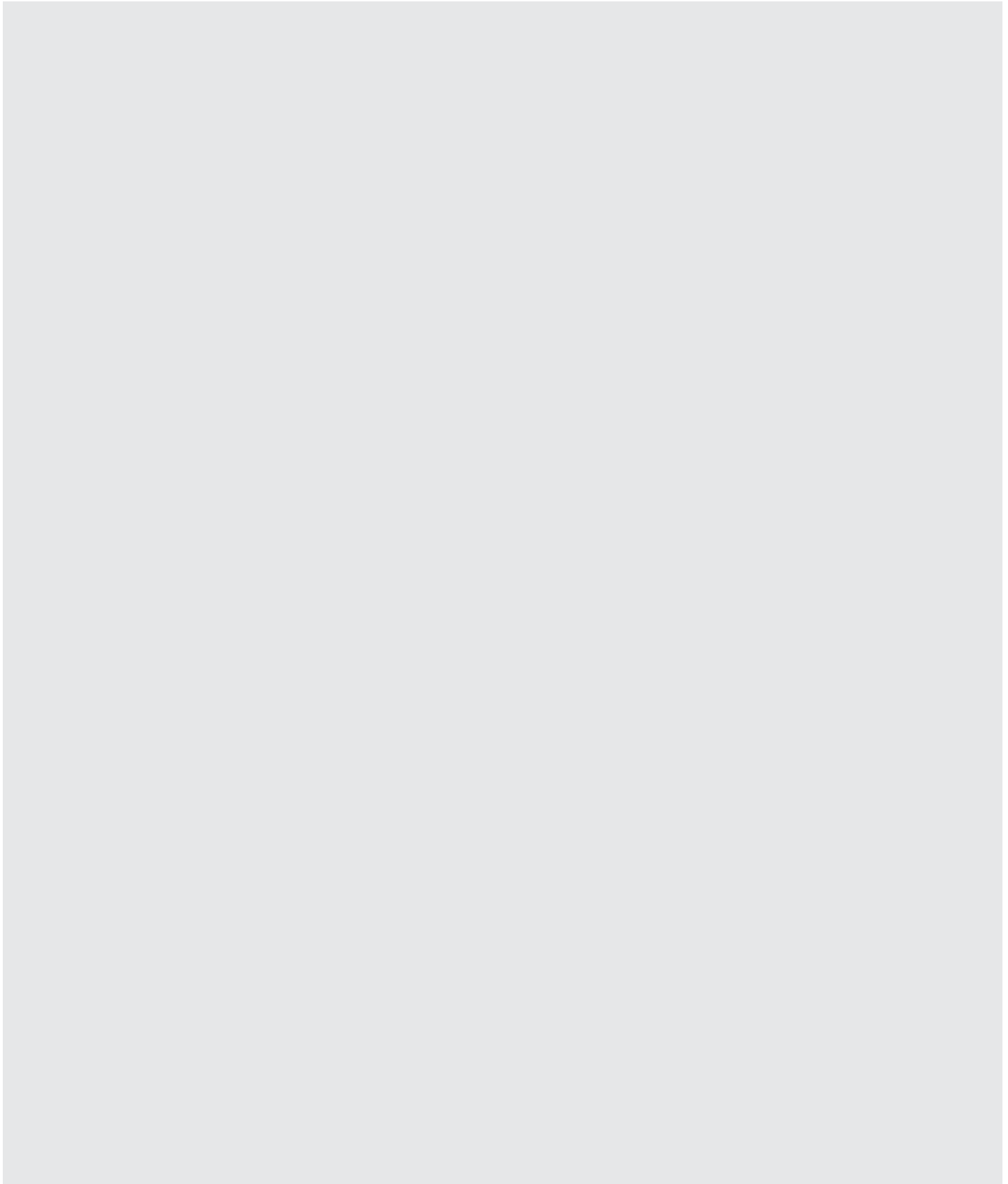
II. PROJECT INFORMATION, PAGE 5

1. Please describe your project in detail. If you have any drawings, photos, or renderings, please submit with your application and include the file name for each item in Section VIII. SUPPLEMENTAL INFORMATION.



II. PROJECT INFORMATION, continued - PAGE 6

Additional space for project description, if necessary.



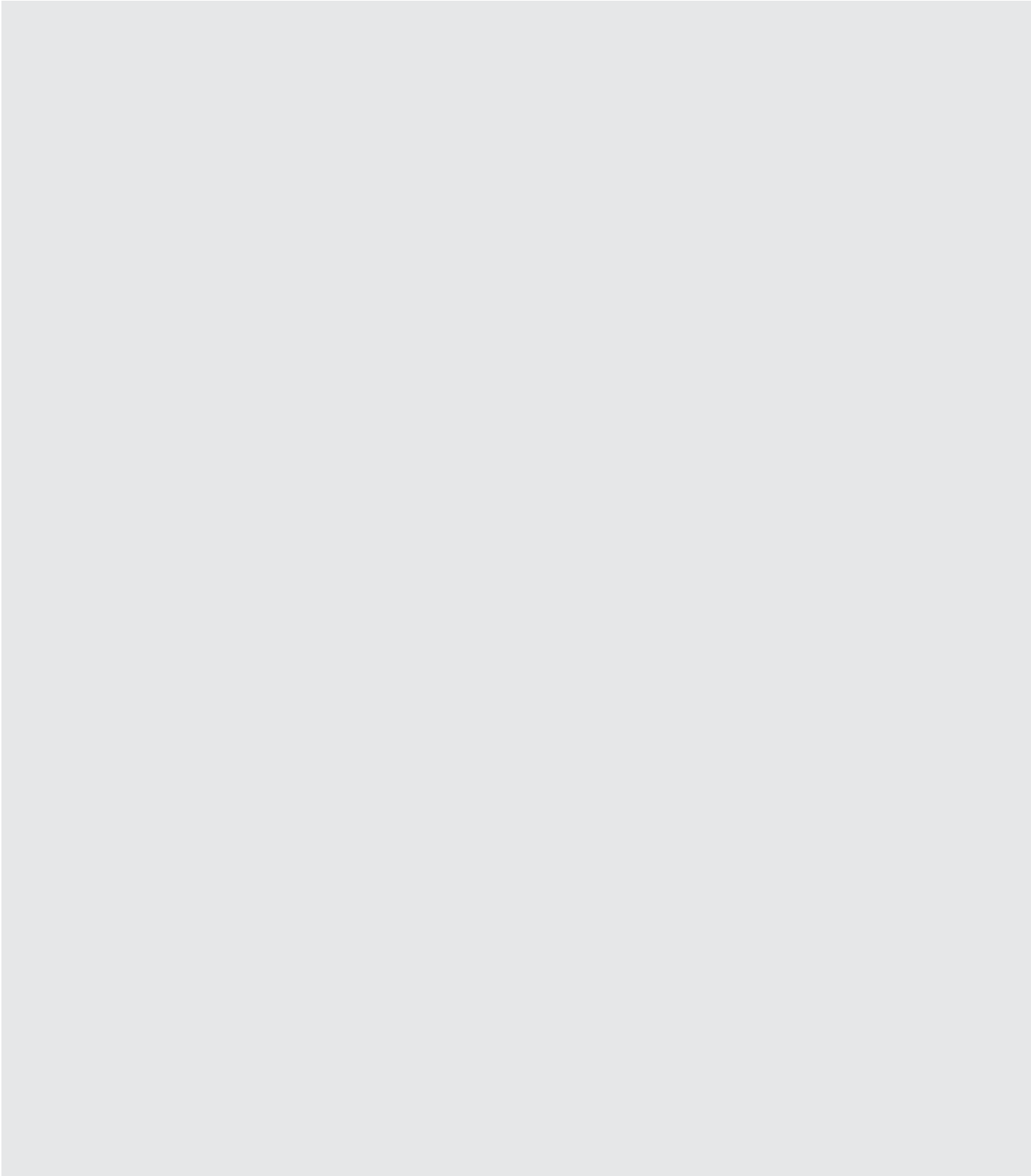
II. PROJECT INFORMATION, continued - PAGE 7

2. Is your project an expansion of or improvement to an existing facility?

Yes

No

3. Describe the value of your project to the region.



II. PROJECT INFORMATION, continued - PAGE 8

4. What is the projected construction date?

5. What is the projected completion date?

6. When is the projected opening date?

7. Please add other project milestones. (Date, Milestone Description)

Date: Milestone Description:

Date: Milestone Description:

Date: Milestone Description:

Date: Milestone Description:

Date: Milestone Description:

Date: Milestone Description:

8. When will TPDF funds be required?

9. If your project will not begin construction within 18 months from notification of award, explain why a commitment of funding is crucial to your project at this time.

II. PROJECT INFORMATION, continued - Page 9

10. Does a similar project to yours already exist in Western North Carolina or anywhere else in the US? If so, please identify the project(s).

[Redacted area for project identification]

11. If a similar project already exists in Western North Carolina, please describe how your project will draw additional overnight visitors.

[Redacted area for description of additional overnight visitors]

12. Has a feasibility study been completed for this project? **Yes** **No**

If yes, please submit with your application and indicate the file name here: [Redacted area]

13. Has a marketing plan been completed for this project? **Yes** **No**

If yes, please submit with your application and indicate the file name here: [Redacted area]

14. Who is your target audience?

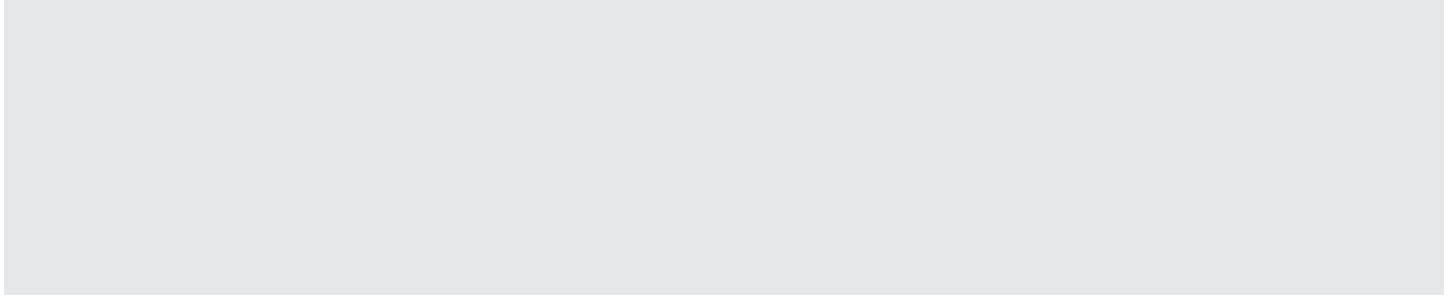
[Redacted area for target audience]

15. How do you intend to reach this audience?

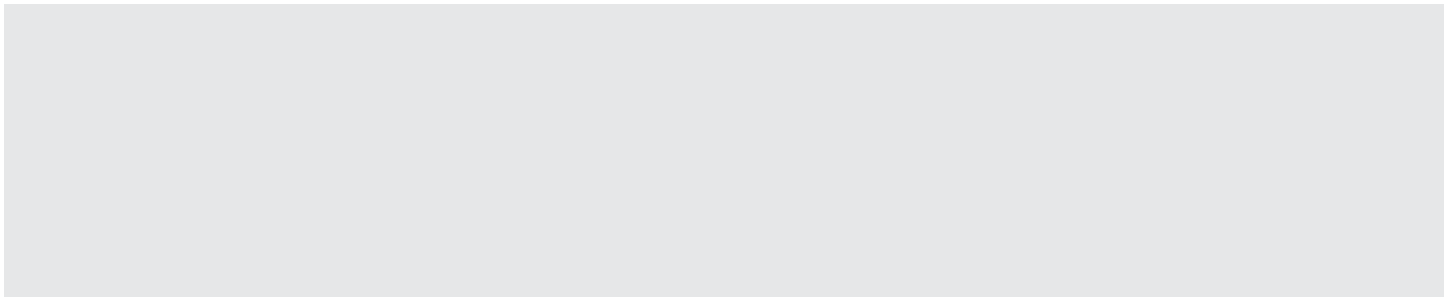
[Redacted area for reaching the audience]

II. PROJECT INFORMATION, continued - Page 10

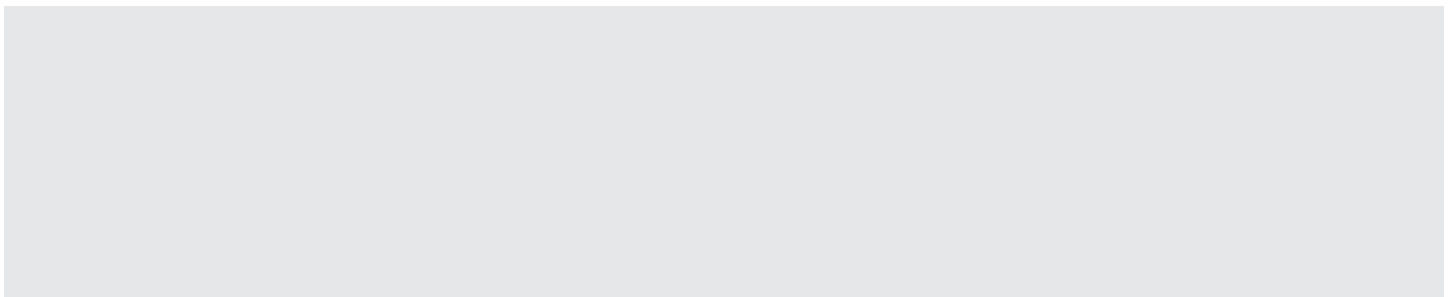
16. How much do you plan on investing in marketing annually? How much will be invested outside of the Asheville market? (Out-of-market is defined as 50 miles or more from Asheville.)




17. Who will implement the marketing plan?



18. How will you determine if you met your goals?



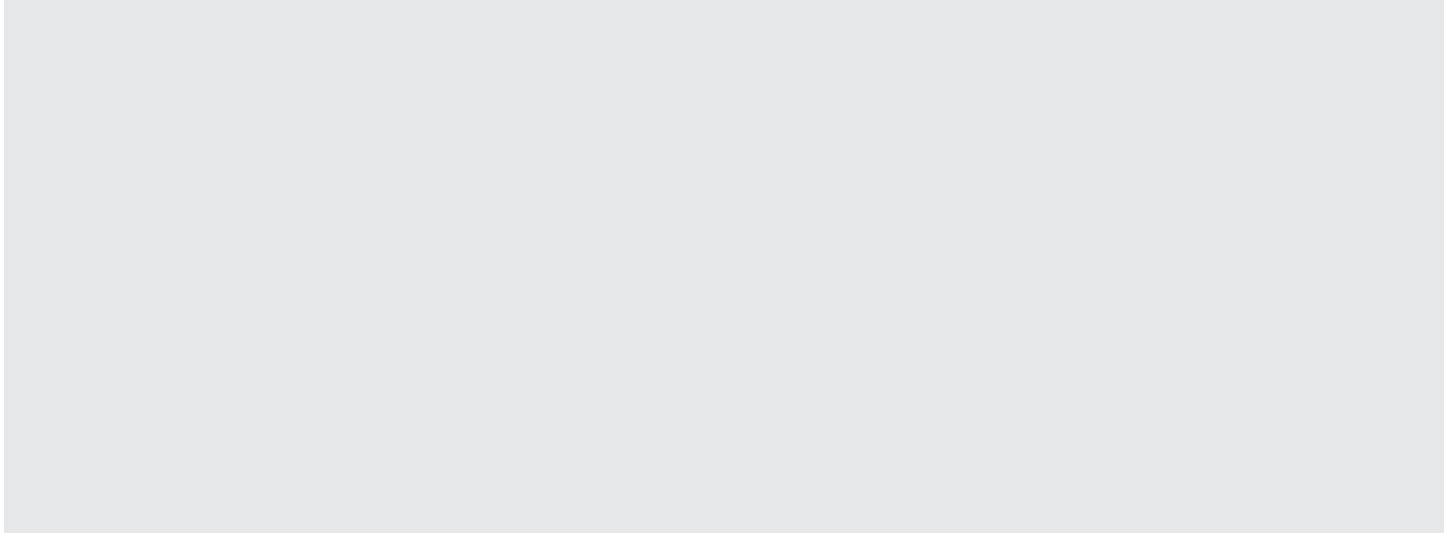
III. RETURNING APPLICANTS ONLY

If you have previously received TPDF funding for the same project, submit the following information with your application and indicate the file name here: 

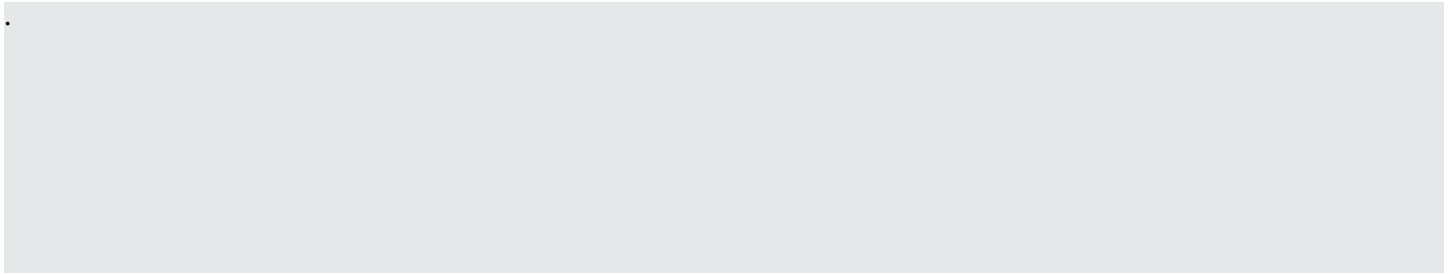
1. Funds raised (not including TPDF dollars) since your last application;
2. Any change in project scope;
3. Overall progress report on the project; and
4. Updated budget and updated construction timeline with reason for delays.

IV. IMPACT OF YOUR PROJECT - Page 11

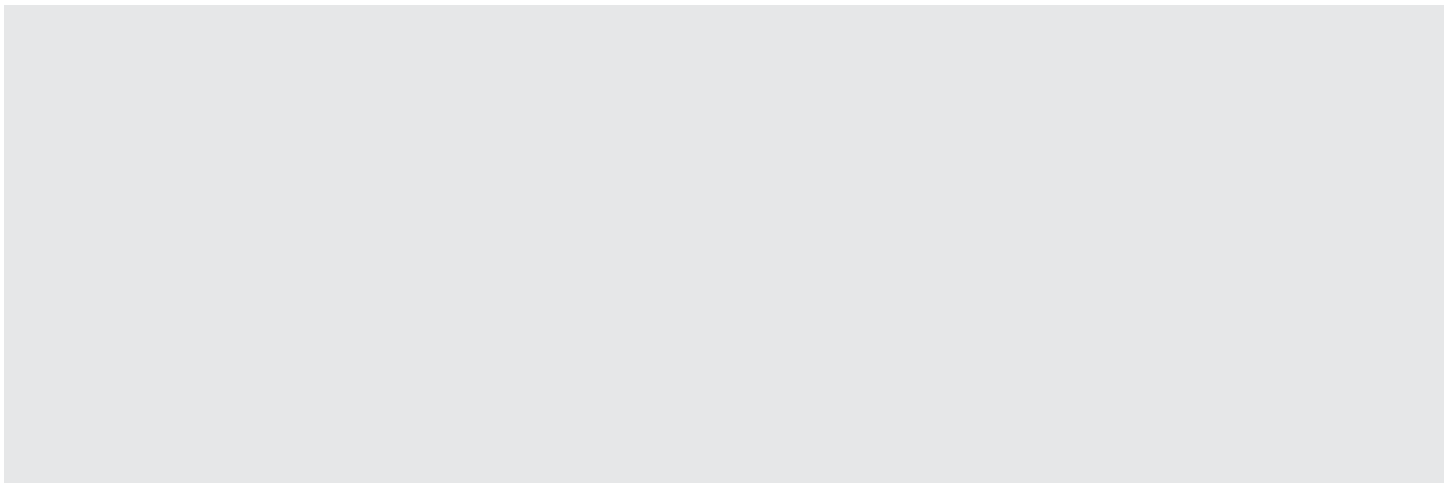
1. A Room Night Calculator has been provided in the Application Packet. Please complete the spreadsheet and submit it with your application. (Required) What are your submitted figures based upon? (Example: existing customer data, ticket sales, research, etc.)



2. Describe the size of the market to be served by your project.

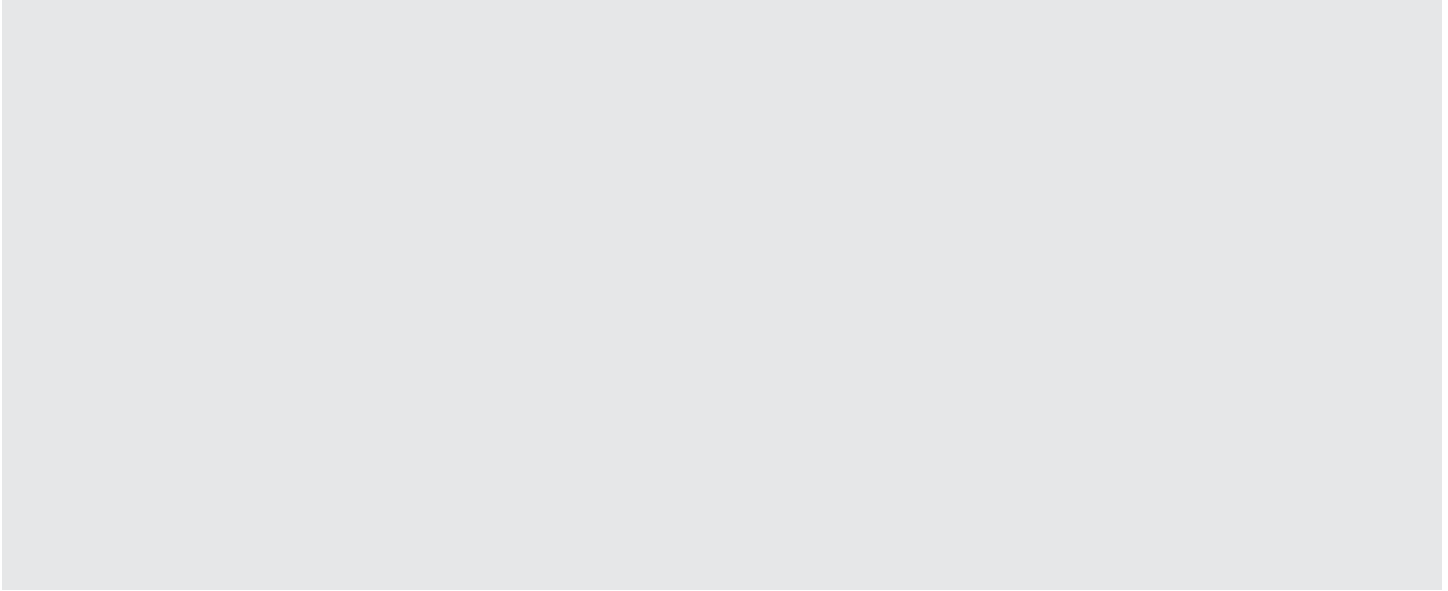


3. Will your project draw visitors to the destination specifically during identified periods of need for hotel room nights? Identified needs periods in Buncombe County are weekdays and January through March. Please describe in detail how your project will fill room nights during identified periods of need.

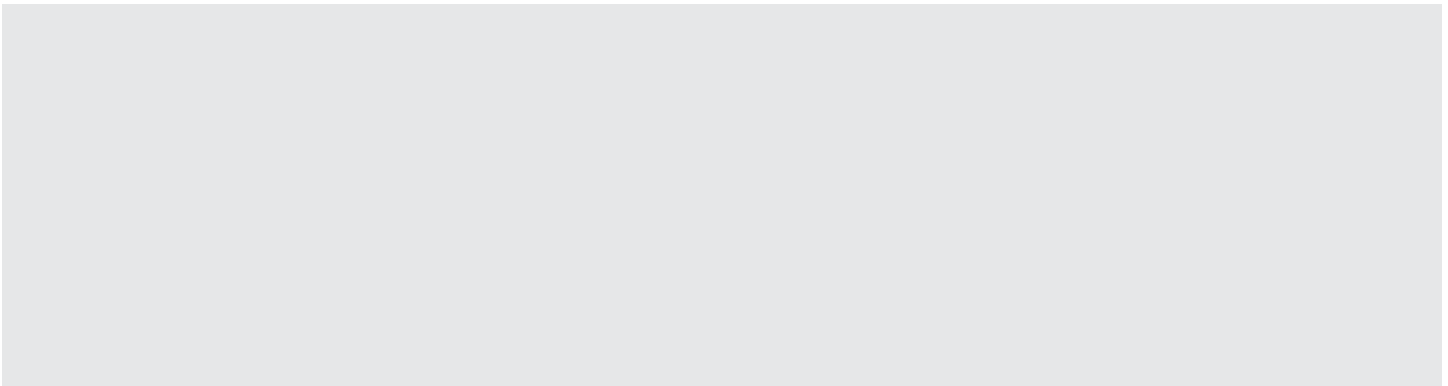


IV. IMPACT OF YOUR PROJECT, continued - Page 12

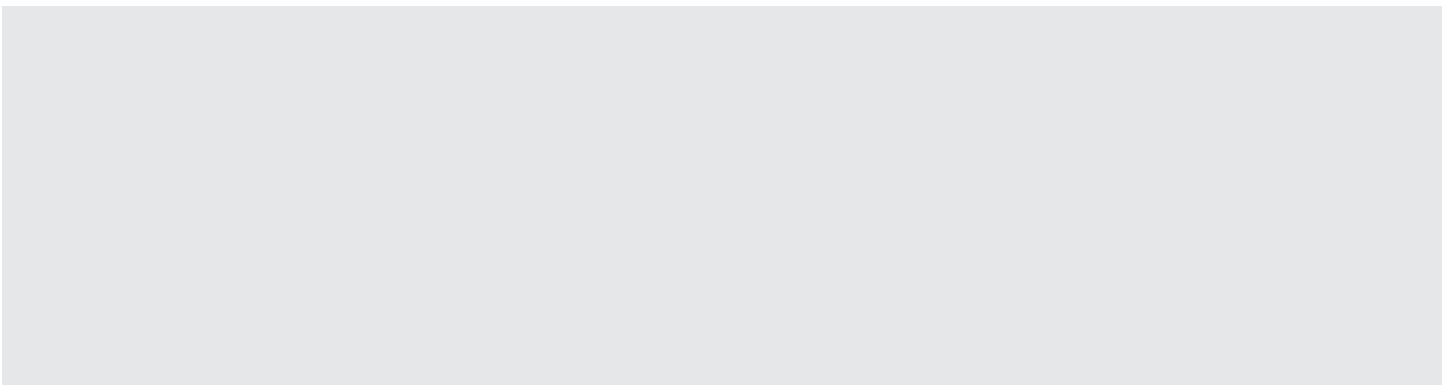
4. What methodology do you plan to implement to capture these visitation statistics and the project's room night impact once your project opens?



5. If you are an existing destination, describe how your proposed project would help increase your current impact on tourism and overnight stays.



6. Discuss the potential for your project to stimulate additional development projects.



IV. IMPACT OF YOUR PROJECT, continued - Page 13

7. After your project opens, how many new, permanent jobs do you anticipate your project will generate?

Full-time equivalent positions: Seasonal or Part-time positions:

V. FINANCIAL INFORMATION

1. Amount of funding requested:

2. Type of funding request: Loan Guarantee Grant Debt Service

3. What is the estimated total development budget of your project?

4. What is the estimated total construction budget of your project, excluding design fees and feasibility studies?

5. Will you secure at least the same amount of funding for which you are applying? Yes No

6. If you receive TPDF funding, will it be the first funding committed to your project? Yes No

7. Detail below the current mix of funding sources for your project. Include source, amount, status, and indicate if contingent on receiving TPDF funding. Submit a letter of commitment from each source, if available.

a. Source: Amount:

In-hand Secured Pending Contingent on TPDF

Letter of Commitment file name:

b. Source: Amount:

In-hand Secured Pending Contingent on TPDF

Letter of Commitment file name:

c. Source: Amount:

In-hand Secured Pending Contingent on TPDF

Letter of Commitment file name:

d. Source: Amount:

In-hand Secured Pending Contingent on TPDF

Letter of Commitment file name:

e. Source: Amount:

In-hand Secured Pending Contingent on TPDF

Letter of Commitment file name:

V. FINANCIAL INFORMATION, continued - Page 14

8. If your project is to be supported by a local or state government entity, describe in detail the amount of annual funding required for its operation and the level of commitment to ensuring its continued operation and maintenance.

9. Submit your organization's most recent financial statement (audited, if available) with your application and indicate the file name here:

10. Submit a document (up to 3 pages) summarizing your financial schedule for the first 3 years of operation for your project, including a pro-forma, profit and loss, and balance sheet with your application and indicate the file name here:

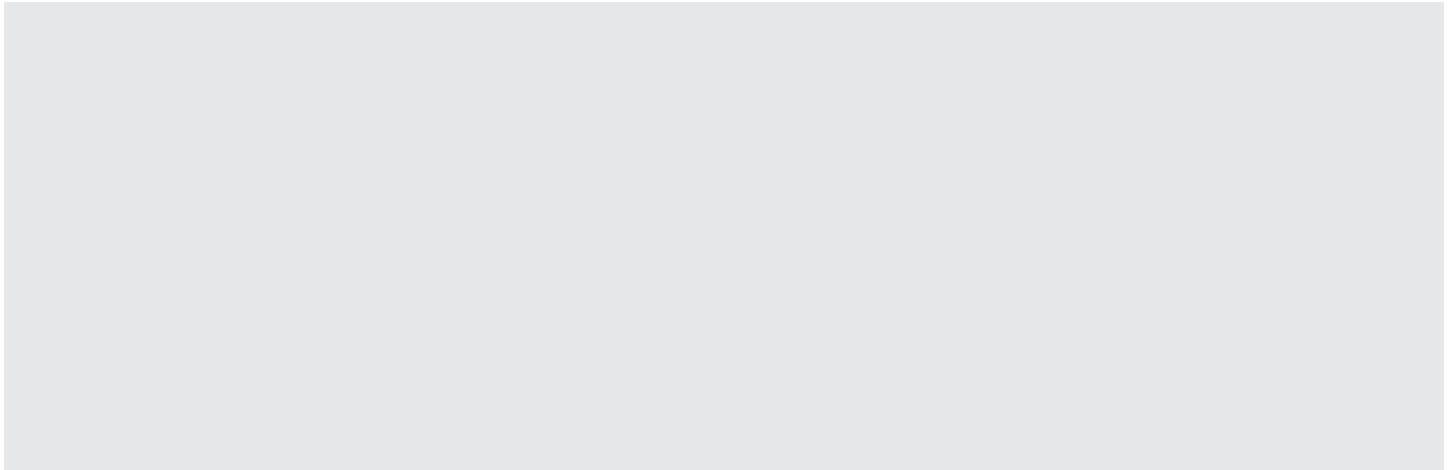
VI. DESTINATION BRANDING

If you are awarded TPDF funding, your organization may be required to work with the CVB to ensure your employees and/or volunteers deliver the Asheville Area Destination Brand Promise to visitors, including the following marketing activities:

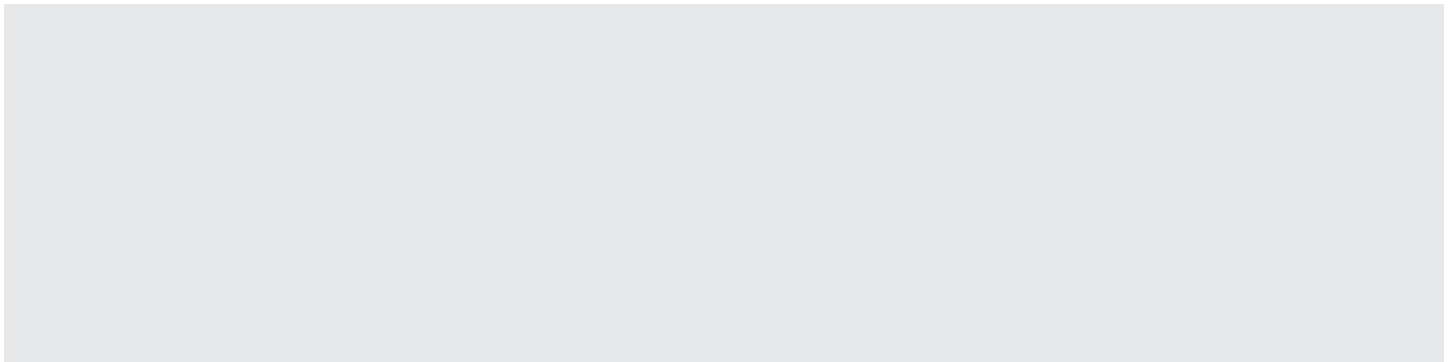
- Distribute Asheville Travel Guides at your location
- Display a reciprocal web link to ExploreAsheville.com on your website
- Ensure your staff knows and understands the Asheville Area Destination Brand Promise

VI. DESTINATION BRANDING, continued - Page 15

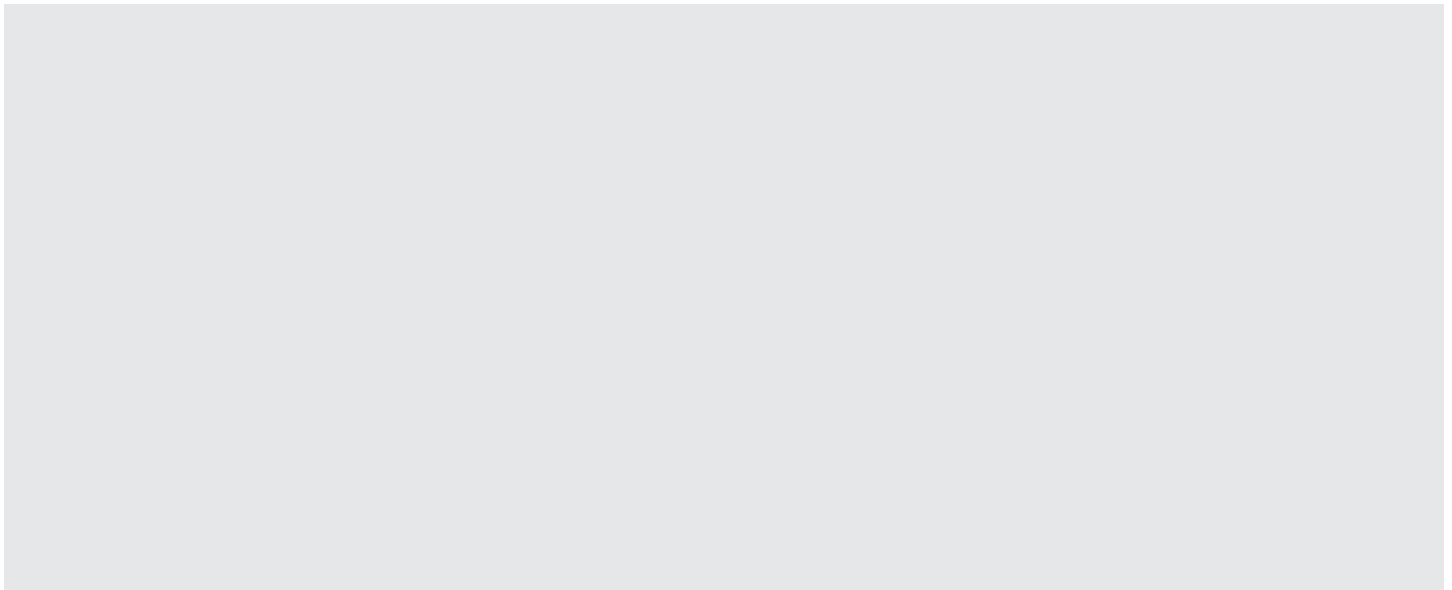
1. How does your organization and proposed project complement the Asheville brand?



2. Please describe any additional identified Asheville branding opportunities you currently deploy or intend to pursue:



3. Discuss the environmentally sustainable aspects of your project and how they will help minimize environmental impacts on Western North Carolina.



VII. CURRENT TOURISM IMPACT - Page 16

If your organization currently contributes to regional tourism, please answer the following questions. If you are a new organization, please enter "N/A" in the fields below and proceed to the next section.

1. What is the current annual visitation at your organization?

2. How many out-of-market visitors do you receive annually? Please describe how you define out-of-market.

3. Describe your methodologies for capturing annual and out-of-market visitation.

4. What percentage of your guests spends the night in paid accommodations in the Asheville area?

5. Please describe the demographics of your current visitors.

VIII. SUPPLEMENTAL MATERIAL - Page 17

1. Please submit with your application up to three, one-page letters of recommendation regarding your ability to lead this project to success and indicate the file names here:

Letter 1:

Letter 2:

Letter 3:

2. If you would like to submit additional supporting documentation with your application, please indicate the file name and a description of the document here:

Document 1 - file name:

Description:

Document 2 - file name:

Description:

Document 3 - file name:

Description:

VIII. APPLICANT AGREEMENT

Please enter your initials and date on each of the following statements, acknowledging that you understand and agree to them. Applications cannot be submitted unless these fields are completed.

DISCLOSURE FOR PUBLIC RECORD

As a quasi-governmental agency, the Buncombe County Tourism Development Authority is subject to Chapter 132 of the North Carolina General Assembly Statutes. Therefore, any and all aspects of this application must be made available by the BCTDA to any party, public or private, upon request without exception. If you are concerned that the distribution of any of your application materials may do irreparable damage to you, your organization, or associated parties, the BCTDA highly recommends that you seek alternative funding in lieu of TPDF funds.

Initials:

Date:

VIII. APPLICANT AGREEMENT, continued - Page 18

PROJECT MONITORING

I hereby acknowledge that if I am awarded TPDF funding, that I will be required to submit an annual report regarding the progress of my project to the BCTDA until its completion. When my project opens, I will be required to submit a full report to the BCTDA regarding key information regarding the progress as well as a summary of the project's plan going forward. Lastly, I acknowledge and agree to submit an annual report to the BCTDA for the first three years after the project has opened regarding its status.

Initials:

Date:

BCTDA MARKETING

I hereby acknowledge that certain information from my application, such as the project description, time line, and leadership, may be used by the BCTDA at its sole discretion for the promotion and marketing of the TPDF program and the region as a tourism destination.

Initials:

Date:

COMPLETED APPLICATION

I hereby acknowledge that I have completed this application in good faith, confidence, and counsel, and have done so in full compliance with the law. I have made no attempt to falsify or misconstrue facts or data anywhere in this application.

Initials:

Date:

Please note: By typing your name in the Signature field below, you are signing this Application electronically.

Name:

Signature (electronic):

Date: