



**2022 GRANT ASSISTANCE PROGRAM (GAP) APPLICATION**  
**"WE FILL IN THE GAP"**

**Belmont County Tourism Council (BCTC) has once again established a grant program for the year 2022. Criteria calls for the event or attraction to be in Belmont County and non-profit. The committee will be looking for projects that encourage visitation or tourism awareness in Belmont County.**

If interested, please fill in this application and return it to the BCTC by **March 4, 2022**. Grant money will be awarded during the regular Board meeting of the BCTC in March, with checks to be issued by **March 31, 2022**.

1. Name of Organization \_\_\_\_\_  
 Type of Non-Profit \_\_\_\_\_ EIN # \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City, State Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Contact Person (s) \_\_\_\_\_
2. Name of Event or Project \_\_\_\_\_
3. Location of event, if different than street address above: \_\_\_\_\_
4. Date of event or date project is to begin and end: \_\_\_\_\_
5. Describe your project and why you need GAP funding? \_\_\_\_\_  
 \_\_\_\_\_
6. How much money are you asking for? \_\_\_\_\_
7. If your event makes a profit, who or what will benefit? \_\_\_\_\_
8. What is your overall budget? \_\_\_\_\_
9. What percentage of your budget is allocated to salaries? \_\_\_\_\_



10. What will the total budget be for this program, project, or event? \_\_\_\_\_

11. How will you promote this program, project, or event? \_\_\_\_\_

If this is an annual event, please list: the overall budget for each of the previous three years, the amount spent on advertising for each year, the estimated attendance for each year, and the profit/loss for each year.

Budget	\$ in Advertising	Attendance	Profit/Loss
2020	_____	_____	_____
2019	_____	_____	_____

12. Estimate the number of patrons/visitors that come from a radius of more than 100 miles away: \_\_\_\_\_

13. Do you have other sponsors that you know of for this program, project, or event? \_\_\_\_\_

If so, list: \_\_\_\_\_

14. If you do not receive funding from the BCTC, how will you accomplish your project, program, or event? \_\_\_\_\_

15. What other information do you feel is pertinent to this GAP application? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Please include a list of your Board of Directors: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Return to:**  
Belmont County Tourism Council  
Attn: GAP Grant  
67800 Mall Ring Road, Unit # 485  
St. Clairsville, OH 43950



## BELMONT COUNTY TOURISM COUNCIL 2022 GRANT AGREEMENT

This Grant Agreement (the "Agreement") is made and entered into by and between the Belmont County Tourism Council (hereinafter referred to as the "Grantor") and THE GRANTEE.

### STATEMENT OF THE AGREEMENT

NOW, THEREFORE, in consideration of the foregoing and the mutual promises and covenants set forth; the parties agree as follows:

1. Grant of Funds

Grantor hereby grants funds to Grantee in the amount of \$ \_\_\_\_\_ to be used for the purpose requested in the Grant Application. The funds shall be paid to Grantee by March 31, 2022.

2. Use of Funds

Grantee shall use the funds for project or event as listed in the original grant application.

3. Proof of Expenditure

Grantee shall use the funds only for the purpose requested. Grantee MUST provide to Grantor, copies of paid invoices as proof that Grant Funds were expended for the stated purpose by January 31, 2023. If documentation is NOT PROVIDED, Grantee will be REQUIRED to return the Grant Funds by January 31, 2023.

4. Time Frame for Expenditure of Funds

Grantee must spend the funds by the end of the calendar year in which they were awarded or December 31, 2022.

5. Entire Agreement

This agreement represents the full understanding of the parties.

Signed for Grantee: \_\_\_\_\_ FED Tax ID number: \_\_\_\_\_  
(organization)

Signed for Grantor: \_\_\_\_\_ Date: \_\_\_\_\_  
(Belmont County Tourism Council)

Witness: \_\_\_\_\_ Date: \_\_\_\_\_