

# HURRICANE CITY

## RAP TAX APPLICATION FORM 2019

Please complete each section of the application completely. If the application is not fully completed the City may reject your request.

### 1. ENTITY INFORMATION

Name:					
Address:					
City:		Zip Code:		Website:	
Type of Entity:	<input type="checkbox"/>	Publicly Owned or Operated	<input type="checkbox"/>	Private Nonprofit	
If Private Nonprofit, list the tax identification number in the box to the right and attach confirmation of 501 ( c ) 3 status					

### 2. PROPOSAL SPECIFICS

Contact Person:			Email:		
Work Phone:		Hm Phone:		Cell Phone:	
Project Start Date:		Total Project Budget:			
Project End Date*:		Funds Requested:			
Project Title					
Project Description:					

### 3. PROJECT MERIT

A. What is the rationale and or purpose for this project or equipment?

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B. Who are the potential beneficiaries? (specify numbers and ages etc.)

C. What are the long-term benefits of this project?

**4. BUDGET AND TIMELINE**

A. Give a precise line item budget below or attach one to this document. Include all sources and amounts of revenue, including both cash and in-kind donations and sponsorships as well as fees for participation. Also include the amount of requested RAP tax funds in the revenue portion. Expenses need to show a breakdown by category to include separate line item entries such as for goods, services, equipment, and marketing, etc.

Total project Budget		Amount of RAP Tax Requested	
What other funds will be used. How much and what is the source.			

Detail Budget	Description	Amount	

B. Provide a brief timeline for completing this project including the starting date as well as various phase or stages throughout the project until its completion. Attach additional pages if necessary. If this is for purchase of equipment list the date you expect to make the purchase.

**5. RECOGNITION OF FUNDS**

If you have received funds in the past explain how your have publicly recognized those funds? How will you publicly recognize funds received this year?

Signature of Entity Representative: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_