



## **2026 LODGING TAX FUNDING APPLICATION**

### **APPLICATION CONSIDERATIONS**

The Lodging Tax Advisory Committee uses an application Scoring Rubric as part of the application selection process. Some questions on this application have an assigned score value. Scores will be considered by the Committee but are not the final determining factor for award selections.

Supplemental attachments will be uploaded at the end of this application.

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### **APPLICATION CATEGORY**

Please review the categories listed below and select the application type that best matches your proposed activity. A separate application must be submitted for each unique activity.

#### **Special Event/Festival**

A planned public or social occasion designed to attract tourists. Events/Festivals may be single occurrences or a series of occurrences during the funding year.

#### **Tourism-Related Facility**

Real or tangible personal property with a usable life of three or more years or constructed with volunteer labor that is: owned by a public entity or owned by a nonprofit organization used to support tourism, performing arts, or to accommodate tourist activities.

#### **Tourism Promotion/Marketing Activities**

Activities, operations, and expenditures designed to increase tourism, including but not limited to advertising, publicizing, or otherwise distributing information for the purpose of attracting and welcoming tourists; developing strategies to expand tourism; operating tourism promotion agencies; and funding the marketing of or the operation of special events and festivals designed to attract tourists.

#### **Application Type \***

Please select the application type that best matches your proposed activity.

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### **ORGANIZATION INFORMATION**

Application information may be considered a record subject to public review. Applicants are encouraged to provide business-related contact information.

#### **Legal Organization Name \***

**Activity Name \***

Name of activity proposed for funding.

**Are you a non-profit organization? \***

Non-profits must upload a copy of their current non-profit corporate registration with the Washington Secretary of State.

**Contact Information \***

Provide the name and official role of the individual we should reach regarding this application.

**Contact Phone Number \*****Contact Email Address \***

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**ACTIVITY INFORMATION****1. Description of Activities \***

Provide a description of your activities. Include:

- The purpose of these activities;  
If your event is a fundraiser, please specify its purpose and how proceeds will be used.
- The location where your activities take place; and
- If transportation to activities is provided.

**2. Funding Request \***

How much lodging tax funding are you requesting?

**3. Activity Location \***

Do your activities take place within Lacey or the Lacey UGA? **30 pts**

**4. Frequency of Activity \***

How often do your activities occur? **20 pts**

- **Single Day:** Activities occur once.
- **Multi-Day:** Activities occur for multiple days or are ongoing throughout the year.

**5. Tourism Promotion \***

Lodging tax funding supports activities to enhance tourism in Lacey and the UGA. In what ways will your activities attract tourists to and support tourism growth? **50 pts**

Include how you promote your activities, including the methods and platforms used. Indicate the estimated distance visitors will travel to attend. You may attach up to three sample marketing materials (no more than 10 pages total). Please note video content is not permitted as a submission.

**6. Safe, Inclusive, & Welcoming \***

Describe the ways your program promotes a safe environment and fosters a sense of inclusivity and belonging for all. **10 pts**

### **7. Community and Business Collaboration \***

Describe how your activities benefit the community and engage local businesses in Lacey or the UGA. This may include retail businesses, restaurants, or hotels. **30 pts**

If applicable include:

- Efforts you have made to collaborate with businesses; and/or
- Businesses you have partnered with.

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## **BUDGET INFORMATION**

Lodging tax funding is provided to awarded parties on a **reimbursement** basis only, **after** authorized activities have occurred. Funding will not be provided for deposits or in advance. Lodging tax funds are not guaranteed.

### **8. Scope of Services \***

If your application is selected for funding, the Scope of Services listed below may become part of your contractual agreement with the City.

Describe how lodging tax funds would be used to support your activities. List expenses (amount not required) you intend to seek reimbursement for if you are granted funding.

### **9. What is the total budget for your activities? \***

Provide the budget for your activities.

### **10. Financial Stability \***

Is your organization able to conduct these activities without funding from the Lacey Lodging Tax Advisory Committee? Please indicate if activities:

- Can operate fully without funding support;
- Would be limited without funding support; or
- Cannot take place without funding support.

Please describe your main sources of funding and list any other grant programs, including lodging tax funding from other jurisdictions that you have applied for. **30 pts**

### **11. Previous Lacey LTAC Funding \***

Have you received lodging tax funding from the City of Lacey in the past?

If yes:

- How much have you received in the past; **and**
- Are you asking for increased funding in this application?

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## TOURIST IMPACT

Provide an **estimate** of the number of attendees/participants you anticipate participating in your activities for each category. If none, enter zero.

These figures may include tourists, volunteers, vendors, entertainers, etc.

### **Estimated attendees/participants \***

Overall estimated attendance/participants for your activity.

### **Estimated attendees/participants who will travel 50 miles or more \***

### **Estimated attendees/participants who will travel from out-of-state or country \***

### **Estimated paid overnights \***

Stays with paid overnight accommodations.

### **Estimated unpaid overnights \***

Stays without paying for overnight lodging.

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## SUBMISSION DETAILS

### **Application Deadline:**

**August 22, 2025**

### **Required Documents:**

- Completed application
- Examples of marketing materials
- A copy of Non-Profit Corporate Registration, if applicable

### **Questions:**

Sadie Siglin, Management Analyst  
360-456-7788  
LodgingTax@cityoflacey.org

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## PUBLIC RECORDS NOTICE

The information entered and any supplemental attachments for this application may be considered a record subject to public review.

### **Application Acknowledgement \***

I acknowledge that in addition to this application, I may be required to provide the Committee with a supplemental presentation that is anticipated to occur **September 11, 2025**.

I acknowledge that this is an application for a contract with the City of Lacey and if awarded, my organization intends to enter into a Professional Services Agreement with the City of Lacey.

**Information Accuracy \***

I declare that the information provided in this application is accurate and correct.