

FY 2016 A3 - GENERAL APPLICATION CHECKLIST

Materials to be submitted

- Signed Application Cover Page(s)**
- EXHIBIT A: Proposed Scope of Work Narrative**
- EXHIBIT B: FY 2016 Budget for Proposed Scope of Work (3 pages)**
- EXHIBIT B1: FY2016 Budget Narrative (Template)**
- EXHIBIT E: Targeted Return on Investment In Hotel Room Night Revenue Worksheet**
- EXHIBIT F: Personnel Schedule:** Required for all positions being claimed against San Diego Tourism Marketing District Funds.
- Board of Directors List (if applicable):** List of Board of Directors including business names and addresses.
- Disclosure of Business Interests (if applicable):**
- Audit Compliance Acknowledgement:**
- Accounting Compliance Acknowledgement (pending):**
- Work Force Report:** Completed City of San Diego Work Force Report
- Certificate of Good Standing:** Online printout from Secretary of State and Franchise Tax Board www.ss.ca.gov/business. All required filings must be current and the status of the business / corporation must have a current "Active" status.

Packaging Directions

When completing the packets please keep the following information in mind:

- Label each page with the organization name and page number.
- **Use binder clips – do not staple or bind any pages.**
- **Three (3) hole punch all pages.**
- Maintain a margin of at least 0.5".
- Always leave enough space to make the information legible.
- Use a font size of 12 point or larger.
- Keep responses clear and to the point.
- **Submit a total of twelve (12) printed hard copies and a PDF copy (on USB drive) of the full application and all required exhibits.**

Deadline

All packets (regardless of delivery method) must be received by SDTMD staff by:
5 p.m. on Friday, October 17, 2014.

Packets must be delivered to:

**San Diego Tourism Marketing District
Attention: Mr. Lorin Stewart
8880 Rio San Diego Drive, Suite 800
San Diego, CA 92108**

If awarded funds, applicants will be required to submit the following documents in order to finalize an Agreement.

- Revised Scope and Budget (if award is less than amount requested)**
- Proof of Insurance – Certificate(s)**