



City of Sacramento  
CITY OF FESTIVALS SPECIAL EVENT SUPPORT PROGRAM  
Convention and Cultural Services Department  
915 I Street, 3<sup>rd</sup> Floor  
Sacramento, CA 95814  
916/808-8225

**FY21 NOTICE OF GRANT AVAILABILITY**  
**Application Instructions**

**For events between July 1, 2020 through June 30, 2021**  
**The City of Festivals Special Event Grant Program has**  
**a total of \$100,000 to Award for FY21**

Applications will become the property of the City of Sacramento. Incomplete applications may not be processed. Email a completed application to:

[SacCitySpecialEventGrants@cityofsacramento.org](mailto:SacCitySpecialEventGrants@cityofsacramento.org)

Include the event name in the email subject line

**Applications must be received via the email address above no later than**  
**11:59p.m., Friday, April 24, 2020**

It is anticipated Grant Award Recipients will be notified no later than  
Friday, June 5, 2020

The City of Sacramento reserves the right to limit the number of grants. Questions concerning the grant program may be directed to:

Rebecca Bitter, Analyst  
Department of Convention & Cultural Services  
916/808-8052



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**CITY OF FESTIVALS SPECIAL EVENT SUPPORT PROGRAM**  
 Department of Convention and Cultural Services  
 915I Street, 3<sup>rd</sup> Floor, Sacramento, CA 95814  
 916-808-8225

**REQUEST FOR SUPPORT APPLICATION**

**PLEASE SUBMIT THE FOLLOWING WITH THIS APPLICATION:**

1. A full and complete Business Plan
2. A full and complete Marketing Plan
3. A full and complete Logistics Plan
4. A full and complete list of services provided by the City of Sacramento staff and/or departments
5. Copy of 501(c) (3)(6) or other not-for-profit tax status, if applicable
6. **Note: Past recipients must submit a post event report before any new applications will be reviewed.**
7. Incomplete applications may not be processed.

*The undersigned hereinafter referred to as the APPLICANT, hereby makes application to request funding support to the CITY OF FESTIVALS PROGRAM as noted below on the date(s) here specified for the purpose(s) indicated. All applications are subject to approval by the presiding panel of the CITY OF FESTIVALS PROGRAM.*

**Funding is defined as either:**

- A. Services provided by City of Sacramento staff and/or departments; and/or,
- B. Monetary awards where an applicant has demonstrated a need that exceeds City services support, as determined by a screening panel of the CITY OF FESTIVALS PROGRAM.

<b>TODAY'S DATE:</b>
<b>COMPANY/ORGANIZATION:</b>
<b>CONTACT NAME:</b>
<b>ADDRESS:</b>
<b>TELEPHONE NUMBER:</b>
<b>EMAIL ADDRESS:</b>

**COMPANY/ORGANIZATION STATUS:**

**FORM OF BUSINESS ENTITY: CHECK MARK BOX**

**INSERT INFORMATION**

<input type="checkbox"/> NON-PROFIT (COPY OF 501 (C)(3)(6) OR OTHER NOT FOR PROFIT TAX STATUS REQUIRED	NON-PROFIT FEDERAL ID#:
<input type="checkbox"/> COMPANY	STATE REGISTERED ID#:
<input type="checkbox"/> PARTNERSHIP	COUNTY REGISTERED ID#:
<input type="checkbox"/> SOLE PROPRIETORSHIP	DATE COMPANY ESTABLISHED:
<input type="checkbox"/> ASSOCIATION	NAME OF AUTHORIZED REPRESENTATIVE TO SIGN:

**CITY OF FESTIVALS SPECIAL EVENT SUPPORT PROGRAM  
EVENT INFORMATION**

<b>Event Title:</b>	
<b>Summary/Purpose of Event:</b>	
<b>Requested Date(s) of Event:</b>	
<b>Days of Week:</b>	
<b>Event Hours:</b>	
<b>Set-Up Time/Days:</b>	
<b>Please list all performers and entertainment acts. Performers/entertainment acts may not be changed without prior approval of the City of Festivals Program.</b>	
<b>Estimated Attendance:</b>	
<b>Tickets to be Sold (Circle one):</b> <i>Yes</i> <i>No</i>	<b>Price Per Ticket: \$</b>
<b><u>Types of Requested City Services:</u></b>	<b><u>Estimated Cost:</u></b>
<b>Parking for Street Closure, Bagged Meters, etc. (contact Isaiah Abdul-Rahman 916-808-5015)</b>	
<b>Police Services (contact Mike Lange 916-808-0708)</b>	
<b>Fire Services (contact Ken Kwong 916-808-8623)</b>	

<b>Solid Waste for Street Cleaning</b> (contact Enrique Hernandez 916-808-4803)	
<b>Utilities for Water</b> (contact Craig Robinson 916-808-7334)	
<b>Public Works for Electrical</b> (contact John Tampas 916-808-6262)	
<b>Other – Please Specify</b>	
<b>Sub-Total Requested City Services:</b>	<b>\$</b>
<u><b>Monetary Support Requests:</b></u>	<u><b>Estimated Cost:</b></u>
<p> <b>Monetary awards reimburse grantees for expenses that are <i>not</i> City services (examples might be equipment rental, private security, etc...). If the grant amount only partially covers the total grant request, requested City services will be earmarked for reimbursement first.</b> </p> <p> <i>Describe the request and include an estimated cost in the lines below. Additional information may be attached on a separate page.</i> </p>	
<b>Sub-Total Requested Monetary Support:</b>	<b>\$</b>
<b>Total Grant Request</b> <b>(City Services + Monetary Support)</b>	<b>\$</b>

## CITY OF FESTIVALS SPECIAL EVENT SUPPORT PROGRAM REFERENCES

**BANK INFORMATION (LIST 2)**

NAME	DOING BUSINESS AS (DBA)	ADDRESS AND PHONE	CONTACT NAME	YEARS AS CLIENT

**BUSINESS REFERENCES (LIST 3)**

NAME	ADDRESS AND PHONE	CONTACT NAME	PURPOSE OF ASSOCIATION

**MEDIA REFERENCES (LIST 3)**

NAME	ADDRESS AND PHONE	CONTACT NAME	ANNUAL \$ AMOUNT OF BUSINESS

*Please provide a list of facilities, outdoor arenas, and/or streets previously used in the City of Sacramento and outside the City of Sacramento.*

FACILITY NAME	CONTACT NAME AND PHONE NUMBER	EVENT NAME	DATE/ATTENDANCE

**Applicant hereby represents that he/she has made full and complete disclosure of all information, and that all of the above information and statements are true and correct. Applicant also hereby authorizes a representative of the City of Festivals Program to contact names references and obtain information as related to this application. *Please allow 30 working days for processing of application.***

Applicant Name (print): \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

*This application form is subject to change by the City of Sacramento at any time without notice.*

# CITY OF FESTIVALS SPECIAL EVENT SUPPORT PROGRAM

## Business Plan Checklist

This checklist must be submitted with application package

### **FINANCIAL**

- Revenue Sources and Amounts for Entire Event
- Expense Budget
- Sponsorship Program
- Economic Impact to Community 
  - Hotel Room Nights (how will you measure)
- Visitor Spending
- Tickets/Non-Ticketed Pricing

### **MARKETING**

- Attendance
- Media Plan
- PR Plan
- Marketing Plan

### **LOGISTICAL**

- Location of Event
- Map of Event Boundaries
- Parking Needs 
  - Proposed Location
- Partner Organizations
- Volunteer Program