



BUDGET

APPLICATION FOR FUNDING

TOURISM DEVELOPMENT PROPOSAL AND APPLICATION FOR FUNDING
FROM THE CITY OF SOAP LAKE FOR **YEAR 2025**

ISSUED
11 / 2024

VALID
12 / 2025

20
—
25

CITY OF SOAP LAKE
RETURN BY NOV, 30TH 2024

 CITY HALL (509) 246-1211

 WWW.SOAPLAKEWA.GOV

 UTILITY.CLERK@SOAPLAKEWA.GOV

APPROVED YES ☐ NO ☐
OFFICIAL USE ONLY**TOURISM DEVELOPMENT PROPOSAL AND APPLICATION FOR FUNDING
FROM THE CITY OF SOAP LAKE FOR YEAR 2025**

**PLEASE READ THIS ENTIRE APPLICATION AND PROVIDE ALL REQUESTED INFORMATION -
APPLICATIONS WITHOUT THE REQUIRED INFORMATION WILL BE CONSIDERED INCOMPLETE
AND WILL NOT BE CONSIDERED FOR FUNDING**

Applications must be returned by November 30, 2023 to be considered for funding for year 2024.

ALL APPLICATIONS MUST INCLUDE A COPY OF THE ORGANIZATION'S 2024 BUDGET WHICH SHOWS REVENUE SOURCES AND EXPENDITURES. APPLICATIONS MUST ALSO INCLUDE A COPY OF YOUR ORGANIZATION'S PROPOSED 2025 BUDGET WHICH INDICATES PROJECTED REVENUE SOURCES AND EXPENDITURES. APPLICATIONS RECEIVED WITHOUT A COPY OF THE APPROVED OR PROPOSED BUDGET WILL BE CONSIDERED INCOMPLETE AND WILL NOT BE CONSIDERED FOR FUNDING;

Are you registered with the Secretary of State as a non-profit organization? YES ☐ NO ☐
OR, are you registered with the State of Washington and have a Unified Business Identification Number (UBI)? YES ☐ NO ☐

APPLICANT INFORMATION

NAME OF ORGANIZATION	
ORGANIZATION'S MISSION	
NAME OF EVENT / PROJECT	
CONTACT FOR ORGANIZATION	
ALTERNATE CONTACT	
MAILING ADDRESS	
PHONE NUMBER	
ALTERNATE PHONE NUMBER	
TAX ID NUMBER OR EIN	

Return Application to:
City Of Soap Lake 239 2nd Ave SE, PO Box 1270, Soap Lake WA 98851 utility.clerk@soaplakewa.gov
www.soaplakewa.gov



APPROVED YES ☐ NO ☐

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PROVIDE A BRIEF HISTORY OF THE ORGANIZATION / AGENCY

DESCRIBE YOUR EVENT AND HOW IT WILL DEVELOP / INCREASE TOURISM IN SOAP LAKE

WHAT GEOGRAPHIC AREA(S) WILL YOU TARGET WITH YOUR MARKETING EFFORTS

YES ☐ NO ☐

funding application 2025 page 3-4 MPS

APPROVED YES ☐ NO ☐
OFFICIAL USE ONLY**INDICATE THE AMOUNT YOU ARE REQUESTING FROM THE TAX FUND \$**

(FUNDS FROM THIS GRANT PROGRAM ARE REIMBURSED.)

THE CITY OF SOAP LAKE WILL MAKE NO REIMBURSEMENTS FOR ANY EXPENSES without a detailed receipt showing payment(s) have been made in full prior to receiving any tourism funds. Copies of checks or credit / debit card receipts are acceptable. There can be no prepayments. Reimbursement checks must be approved by the City Council which meets the first and third Wednesdays of each month. Checks cannot be issued without this approval. A tear sheet for all advertising must accompany the request for reimbursement.

APPLICATIONS WITH OUT THE FOLLOWING INFORMATION WILL BE CONSIDERED INCOMPLETE AND WILL NOT BE PROCESSED

Each year the City of Soap Lake is required to submit a tourism report to the Washington State Community Trade & Economic Development. This report requires the City to account for the events that receive Hotel/Motel tax revenues. In order for the City to complete this report you are required to provide the following information

Estimated number of tourists: _____ this is your estimate or actual attendance for your event.
Estimated lodging stays: _____ this is your estimate or actual total for those lodging at local hotels, motels, resorts or commercial campgrounds that attend your event.

PLEASE DESCRIBE WHAT METHOD YOU USED TO COMPILE THESE NUMBERS**AUTHORIZED SIGNATURE:**

SIGNATURE:

DATE:

CITY HALL USE ONLY ; RECEIVED BY:

OFFICIAL USE ONLY

SIGNATURE:

DATE:

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