WAWA

MUNICIPAL ACCOMMODATION TAX FUND

APPLICATION

IN PARTNERSHIP WITH

SUPERIOR EAST
Community Futures Development Corporation

SUPÉRIEUR EST
Société d'aide au développement des collectivités

Wawa Municipal Accommodation Tax (MAT) Fund Guidelines

WHAT IS THE WAWA MUCNICIPAL ACCOMODATION TAX (MAT) FUND?

The Wawa MAT Fund was developed though the Municipal Accommodation Tax that is collected from local motels and short-term rentals in the Municipality of Wawa. The Wawa MAT Fund is a non-repayable contribution which supports local economic development projects/initiatives which would increase tourism with the Municipality of Wawa.

WHO IS ELIGIBLE TO APPLY?

Individuals, businesses or community organizations operating within the Wawa geographic area.

WHAT TYPES OF ACTIVITIES MAY BE CONSIDERED ELIGIBLE?

- Projects that work cooperatively in developing Wawa as a vibrant and welcoming tourism destination, where small town Northern Ontario and Lake Superior meet.
- Projects that assist the development of tourism locally.
- Projects that support community tourism grassroot initiatives.
- Projects that align with the community Tourism and Marketing Plan and other initiatives as presented to the committee.
- Focus on projects between October 1st and April 30th.
- Projects funded to demonstrate a measurable ROI.

PLEASE NOTE:

The Wawa MAT Fund does not support retroactive funding or activities that lead to profit generation.
The applicant will allow Wawa MAT Fund Committee to acknowledge publicly that support was provided for the project.

WHAT IS OUR APPLICATION PROCESS?

Obtain a current guide and application form from the Superior East Community Futures website. **If you need assistance when filling out the form, please do not hesitate to contact the office and staff can assist with this. It is advisable for applicants to consult with staff during the application process.**

Applicants can submit applications via email, mail or hand deliver to the following address:

Superior East Community Futures Development Corporation
Attention: Heidi Trudeau, Community Development Officer
14 Ganley St, Po Box 709
Wawa, ON P0S 1K0
Phone: (705) 856-1105
Fax: (705) 856-1107
Email: trudeau@superioreastcfdc.ca

The Wawa MAT committee will review the applications and make the final determination of approval. The Committee will use the criteria listed under the guidelines to make the decision. The application should be submitted at least two weeks prior to the scheduled committee meeting. Committee meetings are normally held on the first Thursday of the month, subject to change. If the application is approved, the funds will be issued against invoices for the project. The decision of the Committee is final and may contain conditions about how the funding will be handled.

Wawa Municipal Accommodation Tax (MAT) Fund Guidelines

Before completing the application, please refer to the Application Guide. If you have any questions, please call Heidi Trudeau at (705) 856-1105 or toll free at 1-800-387-5776 or email: trudeau@superioreastcfdc.ca.

WAWA MAT FUND APPLICATION			
Project Title/Name			
Start Date			
Completion Date			
Project Location			
1. COMMUNITY GROUP OR ORGANIZATION REQUESTING FUNDING			
Group Name			
Contact Person			
Title/Position			
Address			
Town		**Postal Code**	
Phone		**Fax**	
Email		**Website**	
2. BACKGROUND OF ORGANIZATION - MISSION, MANDATE			
3. PROVIDE DETAILS OF THE PROPOSED PROJECT			
4. WHAT ECONOMIC IMPACT WILL YOUR PROJECT HAVE ON TOURISM?			

5. **WHAT RESOURCES ARE BEING COMMITTED TO THIS PROJECT BY YOUR GROUP/ORGANIZATION? (I.E.: TIME, SKILLS, "IN-KIND" CONTRIBUTIONS, FINANCIAL, ETC.)**

6. **ARE THERE ANY PARTNERS INVOLVED OR ADDITIONAL FUNDING APPLICATIONS THAT HAVE BEEN MADE TOWARDS THIS PROJECT? IF SO, PLEASE INDICATE BELOW.**

7. **WHAT CONTRIBUTIONS ARE PARTNERS MAKING TO THIS PROJECT? (I.E.: TIME, SKILLS, "IN-KIND" CONTRIBUTIONS, FINANCIAL, ETC.)**

8. **HOW WILL THE SUCCESS OF THIS PROJECT BY MEASURED?**

9. **PLEASE INDICATE ANY OTHER INFORMATION THAT YOU MAY WANT TO PROVIDE REGARDING THIS PROJECT.**

10. DETAILED PROJECT BUDGET

Please attach a detailed project budget and any information/quotes that support the costs of the project. Please indicate if the sources of project income are confirmed or anticipated.

11. STATEMENT BY APPLICANT

On behalf of and with the authority of the organization, I verify that the information provided in this application to the Wawa MAT Fund is true and correct to the best of my knowledge. It is understood that if the funding is approved, a funding agreement will be prepared by the Wawa MAT Committee, and the organization will need to agree and abide by the terms and conditions set out in the agreement. I am aware that the information that I have provided will be reviewed by the Wawa MAT Committee to determine if the application is approved. I confirm on behalf of, and with the authority of, the organization that the organization confirms that it is solely responsible for all costs incurred with this project. I verify that I have read and understand the information contained in the Wawa MAT Fund Guidelines.

Name of Authorized Person (Please Print)	Position/Title	Signature	Date
Name of Authorized Person (Please Print)	**Position/Title**	**Signature**	**Date**