



Business License Tax City Grant Application for Funds Criteria for Award Eligibility

Twenty percent (20%) of the business license tax collected shall be set aside for economic development for the explicit purpose of business promotion and institutional advertisement for the City of Brentwood and for the good of the Brentwood business community. Organizations, including the City of Brentwood and the Brentwood Chamber of Commerce, may apply annually for these funds on a project by project basis to the Economic Development Director. Disbursement of these funds would require City Council approval.

- ☒ A completed City Grant application must be filled out, detailing the project and the estimated project expenditures, and submitted to the City of Brentwood for approval.
- ☒ City Grant applications are due to the City by March 31st of each calendar, for funds available July 1st of the next fiscal year. You will be notified by July 1st if you are chosen to receive a City Grant. Recipients will be chosen based on priority of project and funds available in this program.
- ☒ Projects considered must be annual projects with a completion date of June 30th of the fiscal year.
- ☒ Funds awarded but not used in that calendar year may be rolled over by filing for an extension. If the monies are not used within the first quarter after the extension is granted (September 30th), those monies will no longer be available to the Agency.
- ☒ Grant monies awarded to applicants are reimbursed quarterly, via a completed reimbursement form (attached) and received by the deadline outlined on the form.
- ☒ A City Grant recipient shall not represent any program or project as a City of Brentwood program or project, or indicate any affiliation with the City of Brentwood, without the express written approval of the City of Brentwood.



Business License Tax City Grant Application for Funds
Fiscal Year _____

Please complete the following and submit by March 31st to:

Gail Leech, Management Analyst
City of Brentwood
708 Third Street
Brentwood, CA 94513
925-516-5118

1. **Proposed Project Name** _____

2. **Requested Funding Amount:** \$ _____

3. **Applicant Information:**

Name of Organization/Agency: _____

Contact Name: _____

Mailing Address: _____

Street Address: _____

City _____ State _____ Zip _____

Email Address _____ Telephone _____ Fax _____

Business License # _____ Nonprofit ID # _____

4. **Proposed Project Information:**

Proposed Project Date(s): Start ____/____/____ and End ____/____/____
Mo. Day Yr. Mo. Day Yr. (No later than June 30th)



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- a. How will the requested funds be used? Describe, in detail, the proposed project. Clearly define any fee schedules that are applicable to this project. If requesting fund reimbursement through a unit of service, clearly define how unit is determined. Identify if the proposed project is a new service, or extension of an existing one.

- b. Specify the proposed area or agency that will benefit from the business promotion and institutional advertising in the City of Brentwood.

- c. What documentation/data/records support the need for this proposed project? Identify your data sources. Additional pages may be included, if needed.



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d. Proposed Project Budget Expenditures:

Line Item	Total Projected Expense	Description	Amount Grant Funds Requested
Salaries			
Consultant Fees			
Equipment			
Supplies/Materials			
Promotion/Publicity			
Travel/Transportation			
Other			
TOTAL			

e. Other Proposed Project budget Revenue Sources

Funding Source	Amount	Committed	Requested
TOTAL			

f. Please describe how you plan to measure/document City Grant fund use (i.e., timesheets, invoices, hourly service rates, client logs). Additional pages may be included, if needed.



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Fiscal Year _____

5. General Agency Information:

- a. List all years that Agency/Applicant has previously received City Grant funding and identify those projects that have been funded:

6. Required Attachments:

Please provide the required copies of the following: *(Please note: Applications without the following documents will not be reviewed for funding)*

Please label attachments A, B, etc.

- A. Names and home addresses of governing board; identify current board officers, etc. Homes addresses are required.
- B. Personnel Information
- a. List of all paid positions by classification and salary scale. If classification is part-time or temporary, indicate percentage of time on an annualized basis.
- b. Identify contract services (bookkeeping, answering service, secretarial, etc.) and total cost per contract on an annual basis.

Signatures:

Applicant

Date

Name of Organization / Agency



City Grant FINAL Report and Reimbursement Form
Fiscal Year _____

THIS IS A MANDATORY FINAL REPORT

This report encompasses project activity, plus provides an overall project summary. The form should be completed and mailed to:

Gail Leech, Management Analyst
City of Brentwood
708 Third Street
Brentwood, CA 94513
925-516-5118

Date Received: _____

Application Number: _____

Office use only

Name of Agency/Organization: _____

Address: _____

Project Name: _____

Contact: _____

Report Prepared by: _____

Telephone Number: _____

Email: _____

Amount of Grant Awarded: _____

Total Amount Invoiced: _____

If funds have not been used to date or project not implemented – sign and return cover page only at this time.

Signature

Date



City Grant Quarterly Report and Reimbursement Form
Fiscal Year _____

THIS QUARTERLY REPORT MUST BE RECEIVED BY THE CITY OF BRENTWOOD NO LATER THAN THE 20TH OF EACH MONTH FOLLOWING THE END OF THE QUARTER

This report encompasses project activity to date. The form should be completed and mailed to:

Gail Leech, Management Analyst
City of Brentwood
708 Third Street
Brentwood, CA 94513
925-516-5118

Date Received: _____

Application Number: _____

Office use only

Name of Agency/Organization: _____

Address: _____

Project Name: _____

Contact: _____

Report Prepared by: _____

Telephone Number: _____

Email: _____

Amount of Grant Awarded: _____

Total Amount Invoiced: _____

If funds have not been used to date or project not implemented – only sign and return at this time.

Signature

Date



City Grant Quarterly Report and Reimbursement Form
Fiscal Year _____

Describe the accomplishments to date of the project funded with City Grant dollars. Focus should be placed on how the project met the needs cited in the application.

Please provide a short case study describing the impact the project had on the people it was designed to serve.



City Grant Extension Request
Fiscal Year _____

This form is to be completed in the event that an extension on spending of grant funds is needed. Requested extensions must be filed no later than June 30th. Please complete and mail this form to:

Gail Leech, Management Analyst
City of Brentwood
708 Third Street
Brentwood, CA 94513

Date Received: _____ Application Number: _____ Grant Extension Approved By: _____

Office use only

Name of Agency/Organization: _____

Address: _____

Project Name: _____

Contact: _____

Reason for Extension Request: _____

Estimated Project Completion Date (no later than September 30th) _____

Telephone Number: _____ Email: _____

Amount of Grant Awarded: _____ Remaining Funds Available: _____

I hereby acknowledge that if remaining funds available are not used by September 30th, that those monies will no longer be available to this organization / agency.

Signature

Date