ROLLOVER
2015-2016 APPLICATION FOR RESORT TAX FUNDS

As required by law, an applicant must be a legal entity formed under the laws of the State of Montana. The applicant must be "an entity" that is capable of both "legally and practically" carrying out the purpose of the appropriation and located within the resort area district. The applicant must be a governmental unit, corporation or limited partnership with the capability of being legally bound by the Appropriation Agreement.

The purpose of the appropriation request must be within the purposes of the District's Legal Ordinance NO. 98-01 (posted online: www.ResortTax.org), as amended, and must benefit the community at large, and not a single person, organization or corporation.

INSTRUCTIONS:

- For new requests and rollover requests, use the forms provided. Do not use your own format; do not change the applications.
- The application must be signed by the governing Board Chair or Officer of the applicant organization. If funded, the governing Board Chair or Officer must also sign the Contract.
- The applicant must appoint an Applicant Representative whom the applicant's governing Board Chair or Officer deems capable of representing the application during the Appropriation process.
- Please provide seven (7) complete copies of each application. Provide concise answers on two-sided, white, 3-hole punched, 8½ x 11 paper. Staple each copy in the upper left corner. Do not submit copies in folders, binders, etc. Do not include extra materials. In addition, provide a PDF copy of the signed application to Info@ResortTax.org.
- Incomplete applications may not be considered for funding. It is the applicant's responsibility to provide all information requested in the proper format.
- Questions? Contact: Whitney Brunner, Administrative Officer (406) 995-3234, Info@ResortTax.org

APPLICATION DEADLINE: Monday, April 6, 2015 3:00 p.m.

- Applications must be received (not postmarked) by the deadline or they will not be considered.
- Applications will be date and time stamped when received at the resort tax office. Applications will be addressed at the Question and Answer Session in the order in which they were received at the resort tax office.

Mail applications to:
Big Sky Resort Area District
PO Box 160661
Big Sky, MT 59716

Drop off applications at:
11 Lone Peak Drive, Suite 204
Town Center, Big Sky, MT

QUESTION & ANSWER: Wednesday, May 13, 2015 1:00 p.m.

APPROPRIATIONS MEETING: Wednesday, June 10, 2015 1:00 p.m.

- To be held in the Big Sky Chapel Community Room, 510 Little Coyote Road, Big Sky, MT.
- The Applicant Representative must be present to answer questions regarding the application. Applicants that do not have a representative present at the meetings may not be considered for funding.
- The public is welcome at all meetings and will be given the opportunity to comment on the applications.

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PLEASE NOTE:

Permitting: All applicants are responsible for securing any necessary permits for proposed projects.

Bidding Policy: Resort Tax Board policy states that project line items exceeding $50,000 are required to get two bids. If the lowest bidder is not accepted, the entity is to provide a written explanation to the Resort Tax Board.

Alcohol Policy: It is the Big Sky Resort Area District Board's policy to not use resort tax funds to provide for the consumption of alcohol. This policy is applicable for active board members and employees of Big Sky Resort Area District and its appropriation funded entities.

Appropriation funded entities are responsible for adherence to this policy and failure to do so may result in the entity being required to return resort tax funds previously paid or termination of unspent resort tax funds.

RESORTTAX
— BUILDING BIG SKY SINCE 1992 —

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Applicant's Official Name: Big Sky Trails Recreation and Parks District

Project Name: Operations

Project Start Date: July 1, 2015 **Project Completion Date**: June 30, 2016

Representative: Steven Johnson, Vice Chair

Address: PO Box 161395, Big Sky, MT 59716-1395

Telephone: 406-539-6660 **Email**: johnsons731@aol.com

Total Rollover Funds Requested $ 5,473

State your estimated payment request schedule for the coming year; amounts should total funds requested. Please enter dollar amounts.

	July '15	Aug '15	Sep '15	Oct '15	Nov '15	Dec '15
Payment Request	$ 2,973		$2,500			
	Jan '16	**Feb '16**	**Mar '16**	**Apr '16**	**May '16**	**Jun '16**
Payment Request	$					

I certify that the application and its attachments are correct to the best of my knowledge.

Signature **Title (Board Chair or Governing Officer)**

Printed Name **Date**

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1) Please explain why this rollover request is necessary and when the funds will be requested in the coming year (400 words max).

We were unable to move as quickly as desired with new grant applications, due to focus on answering key legal and operational questions, researching available grant opportunities, and coordinating joint project opportunities with the Big Sky Community Corporation.