



**OFFICE OF CULTURAL AFFAIRS  
CULTURAL FACILITIES PROGRAM 2017 APPLICATION**

**SUBMISSION DEADLINE: JUNE 30, 2017**

*Applications submitted after this date will not be considered.*

**Instructions**

1. Read the Cultural Facilities Program Guidelines found at [DallasCulture.org/cfp](http://DallasCulture.org/cfp) thoroughly before beginning this application.
2. Complete all application fields (type all responses).
3. Complete and sign the Acknowledgement of Guidelines below.
4. Complete and sign the Application Certification found on page 15.
5. Submit this application and all required attachments listed on page 14.
6. Email complete application, signature pages, and all required attachments to [clifton.gillespie@dallascityhall.com](mailto:clifton.gillespie@dallascityhall.com)

**Purpose of This Grant**

The Cultural Facilities Program (CFP) coordinates and guides the City of Dallas support and funding of investment in long-term improvement, renovation or major repairs of cultural facilities owned and operated by organizations with an annual operating budget less than \$5 million. Applicants may request up to \$200,000. There is no minimum request amount.

**Acknowledgement of Guidelines**

Complete guidelines for this grant can be found online at [DallasCulture.org/cfp](http://DallasCulture.org/cfp). Applicants are required to read the guidelines prior to submitting an application to ensure their eligibility, and to acknowledge the contracting requirements with the City of Dallas, including insurance provisions and payment terms.

**Acknowledgement**

I have read and understand the Cultural Facilities Program guidelines and believe this application to be accurate and complete, and the project to be in conformance with the requirements of the program.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Organization

\_\_\_\_\_  
Date

**This page must be signed and included with your application submission.**

---

# Applicant

**Legal name of organization applying for funding:**

*Organization must also own the property that will benefit from this grant funding*

---

**Name(s) of individual(s) completing application:**

---

**Contact Phone Number:**

**Contact Email Address:**

---

---

## Project Title:

---

**Short Project Description:**

*Briefly describe exactly what your project is. Please limit to 100 words or less*

**Projected Start Date:**

**Projected Completion Date:**

---

**Discipline:**

*Check the one discipline that most accurately describes the main focus of your organization*

Arts Education

Dance

Folk & Traditional Arts

Media Arts

Museums

Music

Presenting &  
Multidisciplinary Works

Theater & Musical Theater

Visual Arts

## Requested Grant Amount

\$

---

## Narrative

We suggest you use about 400 words for each of the following responses. Feel free to use bullet lists. Remember, readers may not be familiar with programming at your facility.

[Continued on the following page]

**Project Description:**

*Describe the project for which you are seeking funds, within the context of your organization's history, mission and goals. Make a case for why this project, or completing this phase of a project, is a priority for your organization at this time.*

PLEASE TYPE ALL RESPONSES. HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED.

**Project Impact:**

*Explain why this project is a priority for your organization and what planning you have undertaken to prepare for this project. Describe the public benefits this project will provide externally to the community, and which of the priorities described in the program guidelines the project addresses. You may also address how the project will affect your operations during and after construction/renovation. For example, will the project change the type or frequency of your programs, raise or lower maintenance costs, reduce or increase staff levels, etc?*

PLEASE TYPE ALL RESPONSES. HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED.

**Relevant Expertise/Experience/Accomplishments:**

*Who will manage this project? Identify relevant members of your staff, both paid and volunteer, outside consultants, design team, project manager(s), and their respective qualifications and responsibilities. Tell us why they are qualified and what role they will play in this project. You may attach complete resumes if you wish. Please summarize here.*

PLEASE TYPE ALL RESPONSES. HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED.

**Project Implementation**

*Clearly state the timeline for your project, priorities, and implementation plan. Summarize in simple language the work that will be completed with City of Dallas funding. If you have a long-term, complex project, describe the “big picture” project and timeline for completion, along with specifics about the phase for which funding is requested. Identify other funding sources, cash and in-kind, to demonstrate community support for this project. Explain how you will change the project scope of work if you are unable to raise the total amount required for completion of your project as planned.*

## Facility

Fill out all of the venue information listed below. (Your organization must own the facility, and at least 85% of the facility must be dedicated to cultural programming. See page 1 of program guidelines.)

**Facility Name:**

---

**Street Address:**

---

Address

Suite/Floor/Etc.

**Dallas, Texas**

City, State

**Zip Code:**

**Facility's City Council District:**

Lookup online at [maps.dallascityhall.com](http://maps.dallascityhall.com)

---

**Legal Name of Property Owner:**

---

## Project Budget

### Project Expenses

Generally only actual construction costs are eligible to be reimbursed from this grant.

Design	\$	_____
Construction	\$	_____
Facility Purchase	\$	_____
Soft Costs	\$	_____
Fundraising	\$	_____
Staff	\$	_____
Other	\$	_____
Total	\$	_____

PLEASE TYPE ALL RESPONSES. HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED.



Please describe *other* expenses listed:

**Project Income**

This OCA Request	\$ _____
Applicant	\$ _____
Foundations	\$ _____
Corporations	\$ _____
Other Government	\$ _____
Individual Donors	\$ _____
Earned	\$ _____
In-Kind	\$ _____
Other	\$ _____
Total	\$ _____

Please describe *other* income listed:

Total Project Expenses \$ \_\_\_\_\_  
Total Project Income \$ \_\_\_\_\_  
*(These must be equal)*

**Project Budget Notes**

*Provide details of any items that require further information for the panel to understand project finances, e.g. types and amounts of earned income, sources of grants, breakdown of construction expenses, etc.*

# Supplemental Information

Applicants are required to provide a current board list and a list of programs/activities. Additionally, all applicants are required to attach their most recent IRS Form 990.

## Board List

*Attach additional pages in the same format if needed.*

Name	Title (if applicable)	Affiliation	Term

**2017 CULTURAL FACILITIES PROGRAM APPLICATION**  
**SUBMISSION DEADLINE: JUNE 30, 2017**

**Program/Event List**

*You must submit a list of your organization’s events, programs, and/or primary activities from the last 12 months. Include date or date range, location, and estimated attendance. Attach additional sheets if necessary. Attach additional pages in the same format if needed.*

Program/Event	Dates	City, State, Zip	Attendance

**Program/Event List (continued):**

--

PLEASE TYPE ALL RESPONSES. HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED.

# Attachments

**The documents listed below MUST be submitted with this application.** Failure to submit required documents with this application will result in disqualification.

1. Secretary of State Certificate of Filing
2. IRS determination letter for tax-exempt status
3. Most recently filed IRS Form 990
4. Deed, title or a copy of a recent property tax statement proving ownership of property and building
5. 8.5" x 11" reduction of current architectural plans for renovation projects
6. Documentation of Total Support and Revenue (operating budget) for the last completed fiscal year
7. Proof of matching funds:
  - a. Award letters from third parties
  - b. A list of irrevocable pledges; list of in-kind contributors
  - c. Bank statement confirming cash-on-hand
  - d. List of liquid assets dedicated to the project, or other documents that substantiate funds claimed as match
  - e. Documentation of expenditures made within 5 years before the application deadline for Scope of Work as described herein
8. Letters of support from local community leaders (minimum of 3)
9. Facility Certificate of Occupancy
10. Certificate of Appropriateness, if applicable

## Certification

I certify that the information contained in this application, including all attachments and supporting materials, is true and correct to the best of my knowledge. It is understood and agreed that any funds awarded will be used for the purpose set forth herein and in accordance with the Cultural Facilities Program Guidelines. It is further understood that:

1. Organizations designated for award of funds through this grant program will be required to enter into a contract with the City of Dallas binding them to specific deliverables
2. At the City's discretion, the contract may be structured as a secured loan, requiring a lien be placed on the Awardee's property, the amount of which shall be amortized over a period of time correlated with the funding amount.
3. Appropriate insurance, to be determined by the City's Office of Risk Management, must be obtained and maintained during the contract term.
4. Awardees are generally paid on a reimbursement basis, and will be scheduled per the contract specifications. Up to 25% of the award amount may be paid in advance, provided that appropriate protections for the funds are provided, as determined by the City Attorney. A percentage of the allocation will be withheld pending the City's receipt and approval of the final narrative and financial reports upon project completion.

I certify that this application has been reviewed and approved by appropriate organization officials, and that I am authorized to submit this proposal.

---

Signature

---

Name & Title

---

Date