



GRANT APPLICATION FORM

COMMUNITY SERVICE • EVENT SPONSORSHIP • CULTURAL/OTHER ORGANIZATIONS

Legal Name of Entity (as it is registered with the Washington Secretary of State's Office or if registered in another state, use the legal name as it is registered in that state):

UBI Number: _____ EIN Number: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Contact Person: _____ Title: _____

1. Is this organization a religious organization or entity? Yes No
If yes, please complete the Attestation Form for Religious Organization and submit it with the application.
2. Is the organization a 501c3? Yes No
If yes, please submit a copy of the determination letter with the application.
3. Amount of Grant Funds requested for Fiscal Year 20____: \$_____
4. Will any of the funds be used to pay the wages, whether or not such payment includes benefits, of any person employed by the entity? (This question also applies to a person contracted to the entity to provide services where that person will be paid compensation via contract.) Yes No
5. What other revenue sources do you expect your organization to receive to operate for the next year?

6. Has your organization/entity received funds from the City in a previous year?

Yes No

7. If you answered yes to the above question, please indicate all years within the past three (3) years in which the City has granted funds to your agency/entity, and the amount of funds granted:

Year	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____

Please include all funding and/or in-kind support you are requesting from the City when responding to the questions below. All requests must be made through this application process. One application per organization will be accepted per year.

8. Please check all categories that apply to your organization:

If you check more than one category, please answer the questions for each of those categories.

Community Service – Community services as designed to improve quality of life for community residents, particularly low-income individuals, or to solve particular problems related to their needs. **Please answer questions 9-12.**

Event Sponsorship – Includes:

- A community based local event that brings citizens together.
- Events/Activities that are well-known, high-profile, or well publicized to attract larger audiences.

Please answer questions 13 and 14.

Cultural/Other – Events or activities that may be related to music, history, art, or other similar things. **Please answer questions 15 and 16.**

COMMUNITY SERVICE

9. Please describe how funds will be used to support the poor and infirm:

10. If grant funding from the City is awarded and will be used to serve Maple Valley residents who are deemed poor and/or infirm, please describe the type of population that will be served and the type of screening used to verify eligibility (i.e income, age, etc.):

11. Please describe the type of assistance you will provide (i.e. food, housing, physical and/or mental health, community events, culture/arts, etc.):

12. Other than monetary support, please describe the type(s) and quantity of support you are requesting from the City (i.e. Police, City Staff, Permit Fees, Facility Rental Fees, Equipment, etc.):

See Page 5 for additional documentation to be submitted with the application.

EVENT SPONSORSHIP

13. What is the purpose of the event? How does it contribute towards or support the City of Maple Valley's mission and goals? (i.e. does it bring local citizens together, attract people from outside Maple Valley to spend money in the City, etc.) Please provide the desired date, time, location, intended audience and estimated expected attendance.

14. Other than monetary support, please describe the type(s) and quantity of support you are requesting from the City (i.e. Police, City Staff, Permit Fees, Facility Rental Fees, Equipment, etc.):

See Page 5 for additional documentation to be submitted with the application.

CULTURAL/OTHER

15. What is the nature of your organization and the type of contribution this activity brings to the community?

16. Other than monetary support, please describe the type(s) and quantity of support you are requesting from the City (i.e. Police, City Staff, Permit Fees, Facility Rental Fees, Equipment, etc.):

All organizations/entities please submit the following in this order:

1. Application
2. Summary Income Statement
3. Summary Balance Sheet
4. Copy of Determination Letter (if applicable)
5. Attestation Form for Religious Organization (if applicable)

Please DO NOT attach any additional information

Mail Application Package to:
City of Maple Valley
Attn: Sandy Garrett, Finance Director
P.O. Box 320
Maple Valley, WA 98038

Email to: sandy.garrett@maplevalleywa.gov

Drop off at: City Hall, 22017 SE Wax Road, Ste. 200, Maple Valley, WA 98038