



Santa Rosa County Tourist Development Office
8543 Navarre Parkway
Navarre, FL 32566

Local Event/Marketing Application

Any organization requesting funding will be required to complete this form

Applicant Organization Panhandle Butterfly House

Contact Person Mary Derrick Title Residential Horticulture Agent

Organization Address 8581 Navarre Parkway

City Navarre State FL Zip 32566 Phone (850) 623-3868

Email Address: mderrick@ufl.edu Web Address: panhandlebutterflyhouse.org

Cell (850) 777-7882 Organization IRS Status 501(c)(3)

Name of Event or Project: Monarch Madness

Has this project received grant funding from the SRC Tourist Development Council in the past? yes

If yes, when and how much and what year? 2015: \$4,000 2014: \$3,000 2013: \$1,600

If yes, what is the room history of the event? # of rooms _____ # of nights _____
We do not track this information 2012: \$1,600
2011: \$1,500

2016/2017 Event Request Details

Location of Event or Project: Panhandle Butterfly House & east end of Navarre Park

Date(s) of Event or Project: October 7+8, 2016; 10am-3pm

Detailed Explanation of the Project: Monarch Madness is a two-day special event that celebrates and educates about the monarch butterfly. Visitors can tag and release a monarch butterfly in conjunction with the University of Kansas Monarch Watch program that tracks and studies the unique migration patterns and population trends of the monarch.

Total Budget of Event: \$ 9,350.00
(A budget with anticipated revenue and expenses is required upon submittal of application)

Amount Requested: \$ 4,000.00

Intended use of Funds: programming expense: purchase of butterflies + supplies for tagging monarchs: \$3,335. Special event coverage: \$665.
Match Provide by Organization

In-kind description: volunteer hours contributed by about 70 volunteers

Value of in-kind: \$ 4,000. Match dollars provided by your organization: \$ 3,975

In-Kind Definition – Make up of something other than money; (of payment) given in the form of goods or services and not money.

Projected Attendance: 2,000 Projected Number of Out of Town Visitors: 360
(based on 2015 attendance)

What are the goals and objectives for this event for which you are applying for:

This is a family-friendly event to educate visitors on the uniqueness of monarch butterfly, impart an appreciation for the environmental importance of all pollinators and inspire them to create their own butterfly and pollinator-friendly gardens.

Describe how the effectiveness of this event will be measured:

Number of total visitors, number of out-of-town visitors, comments made by visitors

How will the event/project benefit tourism in Santa Rosa County?

This event occurs during the shoulder season and is a part of the Beaches to Woodlands Tour. Many visitors come from out of the county to attend.

What are the demographics of your targeted attendees (i.e. families, professionals, youth, etc. plus other demographic information as available):

Families, couples, retirees.
About half of attendees are youth, half are adults.

Anticipated number of vendors: 8-10

Will you survey the participants to capture data: yes

If no, how do you intended to collect data for reporting purpose: n/a

Estimated Bed Tax Calculation

Estimated Number of Visitor Rooms: 150
 X
 Estimated number of nights: 1
 X
 Estimated Room Rate per Night*: \$118.
 = \$17,700

- *Use the following estimated rental rates to calculate bed tax estimates
- Spring (March 1-Memorial Day): \$151 per night
 - Summer (Memorial Day – Labor Day): \$188 per night
 - Fall (Aug. 31 – Nov. 1): \$118 per night
 - Winter (Nov. 1 – Mar. 1): \$95 per night

X .05 = \$ 885.00
 Estimated Total Bed Tax Generated

Estimated Sales Tax Calculation

Estimated Number of Visitors: 360
 X
 Average Spending per out-of town visitor per day including transportation: \$110
 X
 Estimated Number of Days In County: 1
 = 39,600

X .065 = \$ 2574.00
 Estimated Total Sales Tax Generated

Total Potential Tax Impact

Total Estimated Bed Tax Generated (from calculation above): \$ 885.00
 Total Estimated Sales Tax Generated (from calculation above): \$ 2574.00
 Total Estimated Tax: \$ 3459.00

Describe how financial resources will be monitored

A volunteer board oversees daily operations. Santa Rosa Clean Community System and UF/IFAS Extension advise + monitor board + financial operations.

Are lodging partners offering a special rate for this Event? ___Yes ___No *n/a*

Will lodging partners provide room night verification after this Event? ___Yes ___No *n/a*

How will information about room nights actually booked for this Event be obtained (e.g. lodging partner reports, registration roster, visitor survey, ticket sales)?

n/a

If this is **NOT** a new event, what efforts are being made to grow the event to increase the number of overnight visitors from the previous year?

Ad was placed in Navarre Chamber booklet; print ads given to local hotels, rental agents for beach condos. Print ads will be available at Butterfly Rainforest exhibit at Florida Museum of Natural History in

Please use the space below to add any additional event information:

Gainesville. This year the director of the Butterfly Rainforest, Dr. Janet Daniels, is to present Monarch Preservation programs at our event.

Estimated Budget

Projected Income

	CASH	IN-KIND	
Entry Fees (participants)	0	0	
Admissions (spectators)	\$ 2,200	0	
Sales (merchandise, etc.)	1,750	0	
Sponsorships	0	0	
Other <i>Vendors</i>	300	0	
Local Event Marketing Funding	4,000	0	TOTAL INCOME
TOTAL	\$ 8,250	\$ 0	\$ 8,250

Projected Expenses

	CASH	IN-KIND	
Contracted officials	0	0	
Operations	\$ 7,475.	0	
Rentals/Equipment	0	0	
Food and Beverage	0	0	
Merchandise for Sale	875	0	
Souvenirs/Giveaways	0	500.	
Print Marketing	500.	0	
Online Marketing	0	0	
Television Marketing	0	0	
Radio Marketing	0	0	
Direct Mail Marketing	0	0	
Direct Sales Marketing	0	0	
Florida's Playground-Branded Promo Items/Prizes	0	0	
Site Fees	0	0	
Sanction Fees	0	0	
Concert/Performance Fees	0	0	
Other	0	0	TOTAL EXPENSES
TOTAL	\$ 8,850	\$ 500.	\$ 9,350

*value of brochures from Florida Museum of Natural History, not included in attached budget.

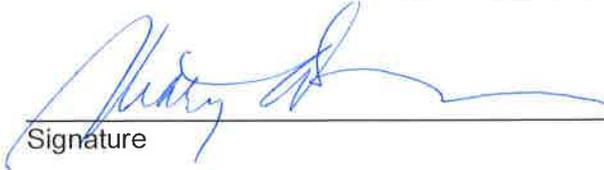
CERTIFICATION AND COMPLIANCE STATEMENT

APPLICANT:

I hereby certify that the information contained in this application is true and correct to the best of my knowledge and that I have read the policies and requirements of the Santa Rosa County TDC grants program and will abide by all legal, financial and reporting requirements as a condition of receiving grant funds from the Santa Rosa County TDC. Signatures must be original in blue ink.

Name: Mary Derrick

Organization: Panhandle Butterfly House


Signature

5-31-2016
Date

Please return the original plus (4) four copies of the Application and the Certification & Compliance Page by **5 p.m. Tuesday, May 31, 2016** to:

Santa Rosa County Tourist Development Office
ATTN: Grants Program
8543 Navarre Parkway
Navarre, FL 32566

Application Check List

- Completed application (pages 4-9)
- Signed certification and compliance form (page 10)
- Copy of event license (if any)
- Copy of event permit (if any)
- Copy of event insurance (if any)
- Copy of liability insurance
- Anticipated budget, including detailed expenses and revenue
- Original and four copies of your complete application package (all items listed above)

NEW

Renewal of Number

POLICY DECLARATIONS

No. NPP2562835

Mount Vernon Fire Insurance Company
1190 Devon Park Drive, Wayne, Pennsylvania 19087
A Member Company of United States Liability Insurance Group

NAMED INSURED AND ADDRESS:

Panhandle Butterfly House
PO Box 5208
Navarre, FL 32566

THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER. SURPLUS LINES INSURERS POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.

POLICY PERIOD: (MO. DAY YR.) From: 09/22/2015 To: 09/22/2016

12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

FORM OF BUSINESS: Non Profit Organization

BUSINESS DESCRIPTION: Non-Profit Directors and Officers

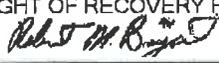
IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

	PREMIUM
Commercial Liability Coverage Part	\$1,165.00
Professional Liability Coverage Part	\$900.00
Wholesaler Broker Fee	\$35.00
Surplus Lines Tax	\$105.00
Service Fee	\$3.68
TOTAL:	\$2,208.68

Surplus Lines Agent's Name: Robert M. Bryant License #D068324
Surplus Lines Agent's Address: 380 Park Place Blvd, Suite 175 Clearwater FL 33760
Producing Agent's Name: Robert Remig
Address: 1701 W Garden St Pensacola FL 32501

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SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.

Coverage Form(s) and Endorsement(s) made a part of this policy at time of issue
See Endorsement EOD (1/95)

Agent: ATLANTIC SPECIALTY LINES OF FLORIDA, INC. (1668)
380 Park Place Boulevard, Suite 175
Clearwater, FL 33759

Issued: 09/30/2015 9:32 AM

Broker:

By: 
Authorized Representative

UPD (08-07) THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART DECLARATIONS, COVERAGE PART COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

Policy No. NPP2562835

Effective Date: 09/22/2015
12:01 AM STANDARD TIME

LIMITS OF INSURANCE

Each Occurrence Limit	\$1,000,000
Personal & Advertising Injury Limit (Any One Person/Organization)	\$1,000,000
Medical Expense Limit (Any One Person)	\$5,000
Damages To Premises Rented To You (Any One Premises)	\$100,000
Products/Completed Operations Aggregate Limit	Included
General Aggregate Limit	\$2,000,000
Abuse And Molestation Liability Each Occurrence	\$100,000
Abuse And Molestation Liability Aggregate	\$300,000

LIABILITY DEDUCTIBLE

\$0

LOCATIONS OF ALL PREMISES YOU OWN, RENT OR OCCUPY

Location	Address	Territory
1	8581 Navarre Pkwy, Gulf Breeze, FL 32566	006

PREMIUM COMPUTATION

Loc	Classification	Code No.	Premium Basis	Pr/Co	Rate		Advance Premium	
					All Other	Pr/Co	All Other	
1	Museums - Not-For-Profit only	46427	1,000 Per 1,000 Total Area	Included	188.877	Included	\$189	
1	Abuse and Molestation Liability - Performing Arts	41795	Flat	Included	0.000	Included	Included	
1	Gift Shops - Not-For-Profit only	13507	10,000 Per 1,000 Sales	Included	8.799	Included	\$88	
1	Special Event without Liquor Liability coverage - Non-Profit Organizations	00041	Flat	Included	665.000	Included	\$665	

MINIMUM PREMIUM FOR GENERAL LIABILITY COVERAGE PART: \$1,165

TOTAL PREMIUM FOR GENERAL LIABILITY COVERAGE PART: \$1,165 MP

(This Premium may be subject to adjustment.) MP - minimum premium

Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:

See Form EOD (01/95)

THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.

11:04 AM
 05/31/16
 Cash Basis

Panhandle Butterfly House Profit & Loss Budget Overview January through December 2016

	200 - Monarch ... Jan - Dec 16	TOTAL Jan - Dec 16
Ordinary Income/Expense		
Income		
4020 · Corporate & business donations	300.00	300.00
4030 · Daily donations	1,700.00	1,700.00
4040 · Tour Donations	500.00	500.00
4540 · Local government grants	4,000.00	4,000.00
5440 · Inventory sales - gross		
5441 · Market sales - gross	1,700.00	1,700.00
5442 · Outreach sales - gross	50.00	50.00
5440 · Inventory sales - gross - Other	0.00	0.00
Total 5440 · Inventory sales - gross	<u>1,750.00</u>	<u>1,750.00</u>
Total Income	<u>8,250.00</u>	<u>8,250.00</u>
Cost of Goods Sold		
5540 · Cost of goods sold		
5541 · COGS - Market	850.00	850.00
5542 · COGS - Outreach	25.00	25.00
5540 · Cost of goods sold - Other	0.00	0.00
Total 5540 · Cost of goods sold	<u>875.00</u>	<u>875.00</u>
Total COGS	<u>875.00</u>	<u>875.00</u>
Gross Profit	<u>7,375.00</u>	<u>7,375.00</u>
Expense		
8110 · Supplies		
8112 · Butterflies & related supplies	4,500.00	4,500.00
8113 · Garden supplies	300.00	300.00
8114 · House & tour supplies	225.00	225.00
8115 · Volunteer supplies	600.00	600.00
8116 · Outreach supplies	50.00	50.00
Total 8110 · Supplies	<u>5,675.00</u>	<u>5,675.00</u>
8170 · Printing & copying	300.00	300.00
8260 · Facility & equipment		
8263 · Equipment purchase	200.00	200.00
Total 8260 · Facility & equipment	<u>200.00</u>	<u>200.00</u>
8320 · Conferences & meetings		
8323 · Volunteer luncheon	350.00	350.00
Total 8320 · Conferences & meetings	<u>350.00</u>	<u>350.00</u>
8520 · Insurance - non-employee	950.00	950.00
8570 · Advertising & marketing	500.00	500.00
Total Expense	<u>7,975.00</u>	<u>7,975.00</u>
Net Ordinary Income	<u>-600.00</u>	<u>-600.00</u>
Net Income	<u><u>-600.00</u></u>	<u><u>-600.00</u></u>