

Hermiston Parks and Recreation

415 S HWY 395, Hermiston, OR 97838

(541)667-5018

parksandrec@hermiston.or.us



Where Life is Sweet

April 1, 2024

Subject: Request for Project Proposals - Transient Room Tax Grants

The City of Hermiston is currently accepting project proposals for Transient Room Tax (TRT) Grants dedicated for recreation for the 2024-2025 fiscal year. The grant program represents 15% of 5/8ths of the Transient Room Tax collected in the prior year, mandated to be spent on Recreation Programs and Projects. The grant program is competitive and limited to recreation related programs and projects taking place within the Hermiston City Limits.

TRT GRANT APPLICATION PERIOD	
Applications Available	April 1, 2024
Applications Due	May 31, 2024*
Presentation Date	June 18, 2024 (4pm-6pm)

***Applications will not be accepted after May 31**

Mail: Hermiston Parks & Recreation, 415 S HWY 395, Hermiston, OR 97838

Hand Deliver: Hermiston Community Center, 415 S HWY 395

Email: parksandrec@hermiston.gov

TRT Funding Criteria and Eligibility:

- Total project fund allocation for 2024 is approximately \$85,000.
- Projects must be within the City of Hermiston.
- Applicants must have a non-profit tax status.
- Projects that benefit Hermiston through enhanced tourism, promotion, marketing, and lodging will be given highest consideration.
- Projects that benefit the greatest number of participants will be given greater consideration.
- Projects that represent a broad base of other support shall be given greater consideration.
- Funded projects are required to submit a breakdown of expenditures on how the funds were spent including receipts prior to reimbursement.

You will be invited to make a 10-minute presentation regarding your proposal on a date to be determined. Bring pictures and illustrations to aid in your presentation.

If you have questions, please call or email.

Cordially,

Brandon Artz, Director
Hermiston Parks & Recreation



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TRT GRANT APPLICATION

PROPOSAL FOR RECREATION PROJECT FUNDING

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Fiscal Year 2024 - 2025

**PROJECT TITLE:** \_\_\_\_\_

|                                 |                                                                    |
|---------------------------------|--------------------------------------------------------------------|
| <b>ORGANIZATION INFORMATION</b> | Organization: _____ Non-Profit Tax #: _____                        |
|                                 | Contact Person: _____                                              |
|                                 | Address: _____                                                     |
|                                 | Email: _____ Phone: _____                                          |
| <b>PROJECT INFORMATION</b>      | Funding Request: \$ _____ Estimated Project Revenue: \$ _____      |
|                                 | How many people will benefit from this project? _____              |
|                                 | Organization Annual Revenue: \$ _____                              |
|                                 | <b>Project Description:</b> (attach additional pages if necessary) |

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applications submitted after May 31 will not be accepted.

