## Application Instructions for the Kentucky Tourism Development Act Incentive Program



July 2024

This document provides instructions for those interested in applying for incentives under the Kentucky Tourism Development Act (KTDA) for the development, expansion or renovation of tourism projects in the Commonwealth. This incentive provides applicants the opportunity to recover up to 25 percent of approved costs over a 10 year term through the recovery of incremental sales tax generated by the project. The recovery increases to 50 percent of development costs over a 20 year term for projects that include, but are not limited to, lodging facilities built on state or federal recreational property, Kentucky Horse Park property or Kentucky State Fair Board property.

Prior to completing this application, please review the applicable Kentucky Revised Statutes (KRS) 148.850 to 148.860 at:

https://apps.legislature.ky.gov/law/statutes/chapter.aspx?id=37710

The completed application and required attachments need to be submitted electronically to:

Kimberly Gester, Director of Tourism Development Kentucky Department of Tourism 500 Mero Street, Fifth Floor Frankfort, KY 40601

Telephone: (502) 892 3198 Email: kimberly.gester@ky.gov A Microsoft Word version of this application can be requested from Kimberly Gester

#### **Required Attachments**

The following items must be included for the application to be considered complete
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- $\hfill\Box$  The Tourism, Arts and Heritage Cabinet Economic Incentive Disclosure Statement
- ☐ Business Plan
  - Business history
  - Marketing plan
- ☐ Business Financial Information
  - For existing businesses, audited financial statements or tax returns for past three years
  - Interim financial statement within 90 days
  - Projections for new project. Include quarterly income statement, balance sheet and cash flow for three years, plus assumption/notes. For an existing tourism development project planning an expansion or renovation, provide projections with and without the proposed expansion or renovation.

- A detailed explanation on the economic impact of the project, which includes how the tourism development project:
  - Shall have costs in excess of that required by statute;
  - Shall be open to the public for the minimum number of days per year as required by statute;
  - Shall attract the required share of visitors from among persons who are not residents of the Commonwealth;
  - Shall not adversely affect existing employment in the Commonwealth or be in direct competition with an existing tourism development project; and,
  - Shall produce tax revenues exceeding the requested sales tax refund amount.

□ O\	vnership	and I	Key	Manage	ment	Info	ormat	ion
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- Resumes of owners identified in Question 7 and other key management
- Authorization to investigate credit
- Certificate of Existence or Certificate of Good Standing from Kentucky Secretary of State
- ☐ For an Entertainment Destination Center, provide documentation on how the project conforms to KRS 148.853(2)(b) and a detailed explanation of public infrastructure costs identified under Question 10 of the application.

Additionally, Applicant shall submit a separate version of the application and required attachments with information considered proprietary or confidential redacted. If the application is requested through an Open Records Request, this version may be used based on determinations found in <u>KRS 61.870 through 61.884</u>.

The Kentucky Tourism Development Finance Authority (KTDFA) has the authority per <u>KRS</u> <u>148.850</u> to impose and collect fees it deems necessary for the preparation and administration of agreements and documents necessary or incidental to any project. The following non-refundable fees will be incurred as a result of participating in the KTDA process:

- Application Fee The KTDFA requires a \$1,000 application fee payable upon execution of the Memorandum of Agreement after receiving preliminary approval by the KTDFA.
- Consultant Fee After receiving preliminary approval by the KTDFA, KRS 148.855 requires that the Tourism, Arts and Heritage Cabinet engage an independent, third party consultant to review the application and related information and prepare a written report that determines if the proposed project meets the requirements outlined in KRS to qualify for incentives.
- Administrative Fee The KTDFA requires an administrative fee equal to one-tenth of one percent (0.1%) of the maximum incentive amount authorized in the Tourism Development Agreement. This fee is payable upon execution of the Tourism Development Agreement after receiving final approval by the KTDFA. If the approved costs, as finally determined, are adjusted upward, the administrative fee will increase accordingly.
- Attorney Fees Legal fees associated with any expenses incurred by the KTDFA's counsel for the project are payable by the approved company upon execution of the Tourism Development Agreement.

## Application for Kentucky Tourism Development Act Incentive Program



July 2024

Date of Application / Revision (if any)	Project Name	
Contact Person		
Name	Telephone	Email

Every project applying for Kentucky Tourism Development Act (KTDA) funds must meet the statutory requirements for at least one of the following tourism development projects as outlined in KRS 148.851 and 148.853:

- An entertainment destination center project,
- A lodging facility project,
- A theme restaurant destination attraction project, or
- A tourism attraction project.

#### Note:

- An expansion or renovation of an existing tourism development shall in all cases be treated as a new stand-alone project.
- Any tourism development project shall not be eligible for incentives if it includes material determined to be lewd, offensive, or deemed to have a negative impact on the tourism industry in the Commonwealth.

#### 1. Tourism Development Project Type

Ina	dicate type(s) or tourism development project being	g submitted.
	Entertainment destination center	

- □ Lodging facility that meets one of the following criteria:
   □ Is located on recreational property owned or leased by the Commonwealth or the federal government;
   □ Involves the restoration or rehabilitation of a structure that:
  - Is listed individually on the National Register of Historic Places; or
  - Is located in the National Register Historic District; and
    is certified by the Kentucky Heritage Council as contributing to the historic
    significance of the district, and the rehabilitation or restoration of the structure has
    been approved in advance by the Kentucky Heritage Council;

Note: Please include the letter from the Kentucky Heritage Council with application.

	Is an integral part of a major convention or sports facility; Indicate name and address of convention or sports facility below:									
		1110	ilcate flame and at	uuress or c	onvention of s	sports re	acility belo	vv.		
	<ul> <li>Is located:</li> <li>Within a 50-mile radius of a property listed on the National Register of Historic Places with a current function of recreation and culture; and</li> <li>In any of the 100 least-populated counties in the Commonwealth, in terms of population density, according to the most recent census; Indicate name and address of property on the National Register below:</li> </ul>									
	<ul> <li>□ Is located on property:         <ul> <li>Owned by the Commonwealth, or leased by the Commonwealth from the federal government;</li> <li>Acquired for use in the state park system; and</li> <li>Operated by the Kentucky Department of Parks or the Kentucky Horse Park Commission;</li> <li>□ Is located on property:                 <ul></ul></li></ul></li></ul>									
2.	<ul> <li>□ Tourism attraction project:</li> <li>□ A cultural or historic site;</li> <li>□ A recreational facility;</li> <li>□ An entertainment facility;</li> <li>□ An area of natural phenomenon or scenic beauty; or</li> <li>□ A Kentucky crafts and products center.</li> </ul> 2. Project Description Please provide a description of the project:									
	Projec	t Ad	dress							
	Stree	t			City	С	ounty		Zip	
	Is the ☐ Yes		iect located in a sta □ No	ate tax inc	rement financ	e (TIF)	district? C	Check a	ddress <u>here</u> .	

	Is the project a new operation? $\square$ Yes $\square$ No								
	Does the project involve the relocation of an existing facility? $\Box$ Yes $\Box$ No								
	If yes, please explain:								
	Is the project an expansion, renovation or rehabilitation of an existing project? $\hfill\Box$ Yes $\hfill\Box$ No								
	Will tourism development project be open  ☐ Every day ☐ Seasonally ☐ Scheduled events only								
	If open seasonally or for scheduled events only, how many days a year will the project be open to the public?								
3.	New Project Information  Complete this section if the project constitutes a <u>new</u> project or location for the applicant.  Project site (acres)  Total size of facilities (sf)								
	If you own the site indicate:  Date of purchase Purchase price \$								
	Is there a mortgage?  □ Yes □ No								
	If yes, who holds the mortgage and what is the current balance?  Mortgage holder Balance \$								
	If you lease the site, indicate owner of the property: Owner of property Address								
	Lease terms: List terms, monthly rent and length of lease.								
	Is there an option or contract to purchase the property? $\square$ Yes $\rightarrow$ $\square$ Option $\square$ Contract $\square$ No								
4.	<b>Expansion/Renovation Project Information</b> Complete this section only if the applicant is <u>expanding or renovating</u> an existing Kentucky facility.								
	Did the original project receive Tourism Development Act incentives? $\hfill \Box$ Yes $\hfill \Box$ No								

ir yes, indicate when the pr	oject received	<u>ımaı approva</u>	i from the Kilbi	-A:		
Drosent acreage (acres)		Drocon	t causes footsa	10		
Present acreage (acres)			t square footag			
Increased new acreage		Increas	sed square foot	age		
If you own the site indicate Date of purchase	:	Purchase	e price	\$		
Is there a mortgage?  ☐ Yes ☐ No						
If yes, who holds the morto Mortgage holder	age and what	is the current Balance	: balance?	\$		
If you lease the site, indicate owner of the property:  Owner of property  Address						
Lease terms: List terms, r	nonthly rent an	d length of le	ease.			
Lease terms after expansion	on/renovation:					
Is there an option or contra  ☐ Yes → ☐ Option ☐ No  Company/Business In Corporate Name/Business	□ Contract  formation	ите ргорегту	:			
Mailing Address						
Street or P.O. Box	City	/	County	State	Zip	
Federal Employer ID Numb	oer Ker	ntucky Employ	er ID Number	NAICS (	<u>Code</u>	
Does company (or parent c □ Yes □ No	ompany) have	any other op	erations in Kent	tucky?		
If yes, please list name and	locations of ot	her operation	ns:			

5.

6.	Taxpayer/Employer Organization         □ Corporation       □ Limited Liability Company         □ Subchapter S       □ Limited Liability Corporation         □ Subchapter C       □ Limited Liability Partnership         □ Partnership       □ Non-Profit Corporation         □ Proprietorship       □ Other					
	Date Business Established		Company's Fiscal	Year		
	State of Corporation		Date Incorporated	d		
	Registered Agent Name / A	Address				
7. Company Ownership Please identify the major owners of the company. Include all owners with 20% or more interest in the company. For subsidiaries, identify owners of the parent company; for a company, indicate publicly traded.  Social					for a public	
	Name	Address	Phone Number		urity nber	Percent Ownership
						•
	Note: The KTDFA must be made aware of any changes in company ownership. Any incentives awarded shall not be transferable or assignable by the approved company without the written consent of the Authority and a passage of a resolution approving the proposed assignee of the incentives as an approved company.  If any of the parties listed above have ever been convicted of any criminal offenses, been in receivership or adjudicated a bankruptcy, been denied a business related license or had it suspended or revoked by any administrative, governmental or regulatory agency, please list violation and explain:					
	·					

8.	Bank of Account				
	Bank of Account / Branch				
	Mailing Address				
	Taming yildaress				
	Street or P.O. Box	City	State	Zip	
	Account Officer				
	Name	Email	Telephone		
	Is bank of account also the lender fo $\square$ Yes $\square$ No $\square$ If no, please provide the following:	r this project?			
	Name of Project Lender / Branch				
	Mailing Address				
	Street or P.O. Box	City	State	Zip	
	Account Officer				
	Name	Email	Telephone		
Is the project lender also the interim lender?  ☐ Yes ☐ No  If no, please provide the following:					
	Name of Interim Lender / Branch				
	Mailing Address				
	Mailing Address				
	Street or P.O. Box	City	State	Zip	
	Account Officer				
	Name	Email	Telephone		

9.	Accountant				
	Accountant				
	Mailing Address				
	Street or P.O. Box	(	City	State	Zip
	Contact Person				
	Name		Email	Telephone	
LO.	Project Financi		e bolovi for the population come		

#### 10

Please provide estimated project costs below for the acquisition, construction, equipping, and installation of the proposed tourism development project. Only those costs associated with tourism components of a project should be included. Please do not alter the categories below without consulting staff.

#### **Estimated Project Costs**

Land or lease	
Building (new construction/additions)	
Improvements (existing buildings)	
Equipment	
Exhibits	
Building fixtures	
Architectural and engineering	
Public infrastructure	
Other	
Total project costs	
KTDA sales tax refund requested	

Sales tax refund cannot exceed 25 percent of total project costs.\* For Entertainment Destination Centers, there is the additional stipulation that tax refund cannot exceed total approved public infrastructure costs.

<sup>\*</sup> Projects constructed on property under the control of the Kentucky Department of Parks, Kentucky Horse Park Commission, Kentucky State Fair Board or the National Park Service that include full-service lodging facilities are eligible to recover up to 50 percent of development costs.

# **Proposed Project Financing**

		Bank loan					
		Bond issue					
		Other (list bel	ow):				
			-				
					_		
		Equity					
		Total source	e of funds		<u> </u>		
		rotal Source	is or runus				
	For this tourism developm such as state tax increme state historic rehabilitation    Yes   No	nt finance (TIF n tax credits?	) district, <u>Ke</u> l	ntucky Enterprise			
	If yes, please indicate pro	grain, agency	and amount	requesteu:			
	Has applicant previously programs?  ☐ Yes ☐ No  If yes, please indicate pro	·	·		·		
	<b>Construction</b> Construction timeline						
	Daisal da Lalata		A . 1				
Project start date Anticipated project completion date							
List contractor, if known							
	Contractor						
	Mailing Address						
	Street or P.O. Box	Ci	h,		State	Zip	
		Ci	Ly		Jac	Zip	
	Contact Person						
	Name	Er	mail		Telephone		

12.	<b>Fmnl</b>	ovment	Proi	ections
14.	LIIIDI	OVIIICIIL	FIU	ICCLIOI13

Please provide estimated employment associated with the tourism components of the proposed project.

	Full Time	Part Time	Full Time Equivalent* of Part Time	Total Full Time and Full Time Equivalent*
Current jobs at project location				
New jobs to be created two years after project completion				
Total jobs				

<sup>\*</sup> Full time equivalent = 1,750 hours worked per year

## **13. Attendance Projections**

For expansion or renovation projects, provide attendance for the past five years by category.

		Kentucky	Out of State	Total	Percent
	Year	Visitors	Visitors	Visitors	Out of State
1					
2					
3					
4					
5					

For <u>all</u> projects, provide projected attendance figures for the first five years by category upon completion of project.

	Year	Kentucky Visitors	Out of State Visitors	Total Visitors	Percent Out of State
1					
2					
3					
4					
5					

What method did you use to arrive at these projections?	

# 14. Marketing

Do you have a marketing plan?

Yes		No

If yes prepared by:	

Does	-	rketir	ng plan inclu lo	de adv	vertising?						
If yo	ur plan do	oes n	ot currently	includ	e advertis	ing, what	future p	plar	ns do you ha	ave to adve	rtise?
Do y □ Y		an ad¹ □ N	vertising age lo	ency?							
If y	es, provid	le nai	me and addı	ess:							
Wh	at is the p	ropo	sed advertis	ing bu	dget for f	irst five y	ears?		\$		
Wha	t percent Year		e in-state a % In St			advertisin of State	g?				
1	rear		70 111 50	atc	70 Out	or state	]				
2											
3											
4							-				
5											
	se identify age exper		types of me	dia you	u plan to	use and t	heir perd	cent	tages as ba	sed on an a	innual
Tel	evision		%	Mag	azine				%		
Rac	dio		%	Othe	er (list)						
Nev	vspaper		%						%	]	
Fac	ebook		%						%	]	
Ins	tagram		%						%	]	
Pleas	se identify	the	primary geo	araphi	c markets	from wh	ich vour	r pro	oiect will dra	aw custome	ers:
			, , , , , , , , , , , , , , , , , , ,	<u> </u>			1		,		
Wha	t method	did v	ou use to ar	rive at	these m	arkets?					
vviia	t metriou	aiu y	ou use to al	iive at	. 111030 1110	ai NCt3:					

Does your marketing plan include public relations efforts or other methods of advertising, such					
as direct marketing, outdoor advertising, web page, etc.?					
□ Yes □ No					
If yes, identify additional methods:					

#### **15. Benefit Analysis**

A. Please provide the following annual employment (new hires only) and payroll estimates for the first ten years of project operation. If the project is an expansion or renovation, include estimates only for the expansion or renovation, not the existing operation.

	Year	New Hires	Annual Payroll
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

What method did you use to arrive at these projections?

B. Estimated revenue from project subject to Kentucky sales tax for the first ten years upon completion of project (does not include Kentucky use tax):

		Sales from	Sales from Expansion/	Sales from New	
	Year	Existing Facility	Renovation	Project	Total Sales
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

C. Estimated revenue from project subject to Kentucky sales tax by category for the first ten years upon completion of project: Food and Year Admissions Merchandise Lodging Other\* Total 1 2 3 4 5 6 7 8 9 10 \* Other purchases subject to Kentucky sales tax such as parking, equipment rentals, salon services, D. Estimated additional revenue your project will bring to other businesses in the community for the first ten years upon completion of project: Year Revenue 1 2 3 4 5 6 7 8 9 10 What method did you use to arrive at the revenue projections in C, D and E? E. List any existing tourism attractions or lodging facilities in the Commonwealth similar to your proposed tourism development project: Project Name and Location 1 2

3

## Certification of Application for Kentucky Tourism Development Act Incentive Program



July 2024

I, the undersigned on behalf of the applicant, hereby represent and certify that the foregoing application information, including all attachments, to the best of my knowledge, is (a) true, complete and accurate with respect to the information concerning the proposed project for which financial incentives are being sought; and (b) does not contain any information for which an entity competing with the applicant may claim a proprietary interest. I represent and certify that the tourism development project as set forth in this application will not occur if not for the state sales tax refund incentive offered by the KTDFA to the approved company.

The applicant shall make the Authority aware if, subsequent to the filing of this application, including during the term of any agreement entered into between the applicant and the KTDFA, the applicant, or any owner or affiliate of the applicant, is convicted of any criminal offenses, is placed in receivership or adjudicates a bankruptcy, or is denied a business related license or has a business related license suspended or revoked by any administrative, governmental or regulatory agency.

The undersigned, on behalf of the applicant, acknowledges that information contained within the application and its attachments may be subject to public disclosure to the extent required by law pursuant to any request made under the Kentucky Open Records Act (KRS 61.870 through 61.884). Efforts will be made, in consultation with the applicant, to protect any confidential or proprietary information as defined in KRS 61.878 from disclosure.

The undersigned, on behalf of the applicant, acknowledges and grants permission to the Authority to share any and all information contained within the application and its attachments with appropriate state and federal agencies and contracted consultants to determine the feasibility and potential impacts associated with the project for which incentives are sought.

In addition, the undersigned, on behalf of the applicant, acknowledges that the applicant will be required to provide additional information during the term of the incentive agreement and agrees to provide this information as required and as requested. Failure to provide the information may result in suspension of incentives. The undersigned, on behalf of the applicant, acknowledges and grants permission to the Authority to share this information with the Kentucky Department of Revenue to assist in the determination of the annual incentive.

Signature	Date
Print Name and Title	

# **Tourism, Arts and Heritage Cabinet Economic Incentive Disclosure Statement**

KENTUCKY

TOURISM, ARTS AND
HERITAGE CABINET

July 2024

In accordance with the Executive Branch Code of Ethics, <u>Chapter 11A</u> of the Kentucky Revised Statutes (KRS), before any board or authority within or attached to the Tourism, Arts and Heritage Cabinet takes final action on any contract or agreement by which a bond, grant, lease, loan, assessment, incentive, inducement, or tax refund is awarded, the beneficiary of such contract or agreement must file with the approving board or authority a disclosure statement stating

- (i) the identity of the beneficiary of the economic incentive package;
- (ii) the identity of any person employed to act on behalf of the beneficiary with respect to the economic incentive package; and
- (iii) the details of any financial transaction (as defined in <a href="KRS 11A.201(6)(a)">KRS 11A.201(6)(a)</a>) between the beneficiary (or any other person listed as an employee or agent of the beneficiary) and any agent or public servant of the Tourism, Arts and Heritage Cabinet, any member of any board or authority within or attached to that Cabinet, or any other public servant involved in the negotiation of the economic incentive package.

NOTE: For purposes of <a href="KRS 11A.201(6)(a)">KRS 11A.201(6)(a)</a>, "financial transaction" means a transaction or activity that is conducted or undertaken for profit and arises from the joint ownership, or the ownership, or part ownership in common, of any real or personal property or any commercial or business enterprise of whatever form or nature. Per <a href="KRS 11A.201(6)(b)">KRS 11A.201(6)(b)</a> "financial transaction" does not include any transaction or activity if it is available to the general public on the same terms.

NOTE: Final action on economic incentive packages will not be taken without receipt of this Economic Incentive Disclosure Statement. Upon final approval of the economic incentive package by the Kentucky Tourism Development Finance Authority, this Economic Incentive Disclosure Statement will be filed with the Executive Branch Ethics Commission. Beneficiaries of economic incentive packages are encouraged to consult with their legal counsel with respect to this Economic Incentive Disclosure Statement. The Beneficiary is the applicant.

Beneficiary's Legal Name	
Type(s) of Economic Incentive Package(s)	Tourism Development Act
Diago identify all employees or agents of the Pe	anofician, who have acted on habalf of the

Please identify all employees or agents of the Beneficiary who have acted on behalf of the Beneficiary in its dealings with the Tourism, Arts and Heritage Cabinet or any Board or Authority within or attached to the Tourism, Arts and Heritage Cabinet in regard to the above incentive package.

Name	Title	Organization

Please attach separate sheet if additional room is needed.					
Please detail any "financial transactions" (as defined above) between the Beneficiary (or any other person listed as an employee or agent of the Beneficiary) and (i) any agent or public servant of the Tourism, Arts and Heritage Cabinet, (ii) any member of any board or authority within or attached to that Cabinet, or (iii) any other public servant involved in the negotiation of the economic incentive package.					
1. Name of Agent or Employe	e of Beneficiary:				
Name of Agent or Public Se	ervant of Cabinet:				
Description of Financial Tra	nsaction:				
2. Name of Agent or Employe	e of Beneficiary:				
Name of Agent or Public Se	ervant of Cabinet:				
Description of Financial Tra	nsaction:				
3. Name of Agent or Employe	e of Beneficiary:				
Name of Agent or Public Se	ervant of Cabinet:				
Description of Financial Tra					
Please attach separate sheet if a	additional room is n	eeded.			
The undersigned, a duly authoric certifies that the information set reviewed, and is true and correc	forth in this Econo	mic Incentive	Disclosure Statement has been		
		Signa	ature:		
Date:					