

FORM A

County Fair Capital Improvement Grant

Organization name (no abbreviations): _____

Contact person: _____

(Note: All mailings will be sent to the organization in care of the contact person)

Signature: _____

Work phone: _____ Email address: _____

Street address: _____

City: _____ State: _____ Zip Code: _____

County Fair: _____ Regional Fair: _____

Type of Organization:

Please select one of the following:

SIGMA Vendor/Customer ID: _____

SIGMA Address ID: _____

*If your fair is not registered with the State of Michigan as a vendor or customer, please visit Michigan.gov/SIGMAVSS to register or call (888) 734-9749

Fair Grant/Project Administrator: _____

Signature: _____

Phone: _____ Email Address: _____

Title of project: _____

Total grant amount requested: _____

FORM B

Performance Measurement Application Supplement

What is the anticipated increase in the following categories related to the completion of this capital improvement project at the fair? (Compare to the most recent three-year average)

	Most Recent 3-Year Average	Anticipated increase related to this project
Overall Fair Attendance	<input type="text"/>	<input type="text"/> %
Overall Non-Fair/Off-Season Attendance	<input type="text"/>	<input type="text"/> %
Number of Non-Fair events held on the fairgrounds	<input type="text"/>	<input type="text"/> %
Gross Revenue	\$ <input type="text"/>	<input type="text"/> %
Non-Fair/Off-Season Revenue	\$ <input type="text"/>	<input type="text"/> %

For new construction/expansion projects, what is the useful life of the project? ____ years

For renovation projects, what is the useful life extension as a result of the project? ____ years

Indicate the category that best encompasses the project (choose the most appropriate category):

____ Public Safety/Security (Fencing, Lighting, Sound System, etc.)

____ Public Health (Utility Infrastructure, Restrooms, etc.)

____ General Fair Infrastructure (Misc. Structures, Roadwork, Sidewalks, etc.)

____ Other: (i.e. All Non-Fair Activity Improvements, Campsite Improvement, etc.)

How will the proposed project, and related grant funds, support the mission of your fair?
(2-3 Sentences in the space below.)

☐ I agree to provide post-project values for all data requested above as well as additional related details outlined in the final agreement. (Check box to indicate agreement)

***If fairgrounds are leased, please attach a signed copy of the current lease agreement.*