

Agritourism Grants Program Application

Destination MT, Tourism Grant Program

The purpose of the Agritourism Grants Program (“Agritourism Grant”) is outlined in the Agritourism Grants Program Guidelines, which can be found [here](#) on the Destination MT website. Please carefully read the [Guidelines and Attachment A: Agritourism Grants Program Application Scoring Criteria](#) before beginning this application. Eligible applicants are limited to one submission per grant cycle.

Please Review Prior to Applying

The application process is as follows:

1. Verify your eligibility by reading through the Guidelines carefully
 2. Familiarize yourself with Attachment A: Agritourism Grants Program Application Scoring Criteria
 3. Familiarize yourself with the Agritourism Grants Program PDF version of the application
 4. Create an Okta Account (for any issues, contact the IT Help Desk 406.444.2000)
 5. Prepare your application materials:
 - a. The business EIN OR UEI
 - b. A current certificate of Good Standing from the [Montana Secretary of State](#)
 - c. Download the required Agritourism Grants Program Budget Template
 - d. **Please note, the ServiceNow platform will automatically log you out after 60 minutes. You must complete your application within that timeframe or save it as a draft to return to working on it. ServiceNow will not save your progress.**
 6. Complete and submit the Agritourism Grants Program Application
 7. All eligible applications will be reviewed
 8. All applications will receive a status notification from Destination MT
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Select the Type of Primary or Main Entity that is submitting this application for the Agritourism Grants Application Cycle:

- A Primary 501(c) Organization
- A Tribal Government
- A City Government
- A County Government
- A Consolidated Government
- An Incorporated City or Town

- An Individual Person (including Montana residents and enrolled Tribal members)
- A For-Profit Business Entity
- A Registered Co-Operative
- A Food and Agriculture Development Center
- A University, College, K-12 School
- Other, please specify.
 - ❖ Text box section needed.

Name of Entity

EIN or UEI of the Entity, if applicable:

Contact Information:

First Name of Authorized Signatory: / Last Name Authorized Signatory:

**Provide first / last name of primary contact for application. This contact will be the legal signatory that would enter into a contract with the Department should the applicant be awarded funds.*

Title of Authorized Signatory:

Authorized Signatory Phone Number:

Authorized Signatory Contact Email:

Authorized Signatory Mailing Address:

Additional Contact Information:

**There must be at least two unique points of contact for the Agritourism Grant. Additional contact information may be any person that will have knowledge of the proposed project and may be involved in the process of completion should the applicant be awarded funds.*

First Name of Additional Contact: / Last Name of Additional Contact:

Title of Additional Contact:

Additional Contact Phone Number:

Additional Contact Email:

Additional Contact Mailing Address:

Eligibility:

1. Are you a legal resident of Montana?
 - [Yes or No]

 2. Are you an enrolled member of one of the eight (8) federally recognized Montana tribes?
 - [Yes or No]

 3. Are you currently registered and in good standing with the Montana Secretary of State.
 - [Yes or No]
 - If NO – please explain why
 - ❖ *Upload section needed *Attach a screenshot or documentation showing current registration & good standing**

 4. What is the title of the Agritourism project?

 5. Where is the proposed Agritourism project located:
 - address,
 - city,
 - state,
 - zip

 6. Amount Requested:
 - \$
 - *Max amount: \$50,000

 7. Total cost of the project ****informational****:
 - \$
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Brief Summary:

8. Please provide a brief project summary that addresses the following:
 - What will you be using the funds for
 - Why you need the requested amount of funding for the project

Location:

9. Please select your tourism region location ****informational****
 - ❖ *Multiple response question needed:*
 - Tribal Tourism Region
 - Central Montana Tourism Region

- Western Montana's Glacier Country Tourism Region
- Missouri River Country Tourism Region
- Southeast Montana Tourism Region
- Southwest Montana Tourism Region
- Yellowstone Country Tourism Region

**See Montana [Tourism Regions Map](#) to determine region location:*

<https://brand.mt.gov/Programs/Office-Of-Tourism/Tourism-Grant-Program/Agritourism-Grant-Program>

10. Based upon the location of your project and the definition of rural and under visited, please identify if any of the below apply. You may select more than one.

- Rural
- Under Visted
- Tribal

**See [Urban & Over-visited Designations Map](#) to determine Rural and Under-visited area:*

<https://www.arcgis.com/apps/dashboards/1482e71be2a34511ab6577fa7689ffdb>

11. If your project is not located in a rural or under visited area, please explain why it can only be completed in an urban and/or over visited area.

Potential for Success:

12. Please describe the Agritourism project. Please explain why you believe your proposed project is an eligible use of Agritourism Grant funds, clearly stated, measurable, and realistic.

13. Please describe how the proposed development aligns with the definition of Agritourism adopted in the Guidelines.

14. Please describe the proposed timeline for project completion.

15. Please describe the likelihood of success of the overall project.

16. Please describe how you intend to complete this project and adhere to compliance and reporting requirements.

Agriculture and Tourism Impact:

17. What do you plan to accomplish with this funding? Your answer must clearly demonstrate how this funding will directly benefit your farm, ranch, or community through new revenue streams.
18. Will the Agritourism project lead to an increase in visitors / attendees?
If yes, how will you measure the increase?
If not, explain why not.
19. Will your Agritourism project generate overnight stays in the surrounding communities?
If yes, how will you measure it?
If not, explain why not.
20. Identify the metrics that you will use to show the benefits that this specific project will have on the farm, ranch, or community and describe them.
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Diversification / Innovation / Enhancement:

21. Please describe how your proposed Agritourism project educates visitors / attendees about agriculture.
22. Demonstrate how this proposal diversifies or enhances existing operations.
23. Is the proposed project new and innovative in the State of Montana? Please describe.
informational
24. Have you been in business for at least one year? ***informational***
○ [Yes or No]
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Knowledge / Partnerships / Marketing / Long-Term Development:

25. Describe your current marketing strategy, market knowledge, and demand for your product.

26. How will you market or advertise this project? ****informational****

27. Who is your target visitor or audience?

28. Who are your community partners? How are they contributing to the success of this project? ****informational****

29. What is your long-term goal with the Agritourism project?

Budget:

If the project request is over \$10,000 grant funds will be awarded on the basis of a 1:1 match. If you are requesting \$10,000 or less in overall grant ask, no match is required.

Download the [Agritourism Grants Program Budget Template](#). This is the **required** template for consideration of funding.

A detailed narrative for each cost requested in the attached Agritourism Grants Budget Template **must** be provided in the budget template. Failure to follow the budget criteria and / or provide a detailed narrative for each cost will disqualify this submission from consideration for this funding opportunity.

30. Upload the completed Agritourism Grants Budget here

❖ *Upload section needed *Upload required budget template**

Applicant Acknowledgement:

By submitting this application for Agritourism Grant Program funding, I hereby certify the following on behalf of the Applicant:

- To the best of my knowledge and belief, the information contained in, and submitted with, this application is true and correct. If the Applicant learns any such information is incorrect, it will inform the Montana Department of Commerce (“Department”) immediately.

- I understand that submitting false or misleading information in connection with this application may result in the Applicant being disqualified to receive financial assistance from the State of Montana. Awards made based on false application may result in the Applicant having to repay the award amount and being referred to local authorities for criminal prosecution.
- I understand that information Applicant provides to the Department, including this Agritourism Grant Program application and supporting documents, may be subject to public disclosure under Montana law. If Applicant believes that any information it submits to the Department should be protected as confidential for any reason, Applicant understands and agrees that it will: (i) notify the Department of that belief prior to submitting the information to Department; (ii) submit an affidavit establishing the basis for that belief; and (iii) if the Department agrees, sign a non-disclosure agreement with the Department.
- I have read and understand the Agritourism Grants Program guidelines published by Department before submitting this application.
- I have legal authority to submit this application and the governing body of the applicant (if applicable) has directed me to submit this application.
- I understand that, if awarded Agritourism Grants funding, the Applicant may be required to provide matching funds as directed by the Department.
- The Applicant will comply with all applicable laws and regulations, including those prohibiting discrimination, including on the basis of race, sex, religion, national origin, age or handicap.
- I understand that Applicant will provide the Department with reports on how it has used Agritourism Grants funding whenever requested, and in the format required, by the Department at no cost to the Department.
- I understand that the Applicant may only submit one Agritourism Grants application per grant cycle.
- I understand that Applicant must sign a contract with the Department prior to receiving any Agritourism Grant Program funding.

- ❖ *Checkbox needed.*
- ❖ *Box for the applicant to type their full name*
- ❖ *Box for the date*