



Occupancy Tax Coordination Committee
AGENDA
July 25, 2023

Committee Members: DICKINSON, Merlino, Wild, Geraci, Strough, Runyon and Diamond

Chair of the Board shall serve as an Ex-Officio member when needed in accordance with Section C (4) of the Rules of the Board.

- I. Committee meeting called to order by Chairman Dickinson.
 - II. Motion to approve minutes of the June 20, 2023 Occupancy Tax Committee.
 - III. Privilege of the floor and public comment
 - IV. Action Agenda/New Business Items:
 - a. Discuss Ice Castles Winter Event application
 - V. Discussion Items:
 - a. Treasurer's Report – Mike Swan
 - b. Occupancy Tax Budget update
 - c. Lake George TV update
 - d. Cool Insuring Arena 2nd Quarter Update
 - e. Lake George Regional CVB 2nd Quarter Update
 - VI. Referrals:
 - a. County Attorney to review Occupancy Tax Spending Plan History and Local Law and provide any updates required. (06.20.22) Update: The county Attorney presented two slides regarding information pertaining to the New York State Statute involving occupancy tax. (11.21.22)
 - VII. Privilege of the floor and public comment
 - VIII. Motion to adjourn
-

Attachment #1: Ice Castles Winter Event Application



APPLICATION FORM

INSTRUCTIONS: Please complete the ENTIRE application and include **ALL items on the page two check list**. Incomplete applications, areas left blank and applications that do not submit all required materials will be considered incomplete and **WILL NOT be reviewed or awarded**. All event budget, financial and marketing information will be used solely for application evaluation purposes by the Occupancy Tax and Tourism Committee and are subject to Freedom of Information Law (Public Officers Law, Article 6) (FOIL) requests. If you are submitting information which is considered proprietary "trade secrets" and is confidential to your organization, please indicate such on your application and indicate which sections should be redacted. Should the County receive a FOIL request for this information, we will contact the applicant regarding this matter.

Amount of Occupancy Tax Funding Requested: \$ 150,000

A. CONTACT INFORMATION

- 1.) Name of Applicant/(s) Organizer/(s) Main Point of Contact
Kyle Standiford
- 2.) Address:
1280 S. 1380 W. #16, Urem, UT 84058
- 3.) Email/Cell phone:
kyle@icecastles.com 801-380-1682
- 4.) Estimated Event Duration (including set-up/clean up times):
10/15/23 - 3/31/24
- 5.) Anticipated Number of Attendees 20,000
- 6.) Anticipated Number of employees/staff (inclusive of vendors and contractors): 12-15

B. EVENT INFORMATION

- 1.) Name of Event: Ice Castles Winter Event (exact name is TBD)
- 2.) Date & Time of Event: 12/1/23 - 2/25/24, Fri-Sun 4:00-10:30 pm
 Peak Season (June-September) Off-Peak (October-May)
- 3.) Location of Event:
Charles R. Wood Park
- 4.) Which category BEST describes your event (check one):
 High Impact: 6,000-14,999 estimated room nights and/or 15,000+ day visitors
 Medium Impact: 1000-5,999 estimated room nights and/or 5,000+ day visitors
 Low Impact: < 1000 estimated room nights and/or 2,500 +/- day visitors

5.) **Event Detail:** Please provide a brief one page detail of your event. (If this request is for an annual event and you have received Occupancy Tax grant funding in the past, please also provide history details from the previous year's event including total attendance, total room nights, any new initiatives that were used to increase visibility or attendance, including new marketing initiatives. If this application is for a new event, please include one page detail of the event, anticipated attendance and past history in other locations, including successes, if applicable.) Please feel free to attach a separate page, if you require more space.



- 6.) Type of Event: For Profit Non-Profit (501-c-3) Not-for-Profit (501-c-6)
 New Event Annual Multi-Day Multi-week/month

7.) How long has this event been in existence: since 2018 Date started: _____

8.) If a multi-year event, what new marketing, promotions and/or activities have been added to enhance the event and increase attendance? *Feel free to attach a separate sheet.*

new this year to Lake George

9.) Total number of attendees projected? 20,000 Previous year's attendees? _____

10.) How will you track attendance and room nights?

Attendance is tracked through ticket sales
 Room nights are tracked and estimated through surveys

11.) Number of day visitors projected? 39

12.) How did you determine this percentage (surveys, zip codes, etc.)?

13.) Number of overnight guests projected? 2,000

14.) How did you determine this percentage (surveys, zip codes, etc.)?

based on our historical experience

15.) Number of overnight accommodations used in previous year? _____

16.) Average length of stay per guest? 1 night

17.) How did you determine total number of overnight rooms?

18.) Do you work/or anticipate working with a third-party company, CVB or other entity to help gather your special event/activity data and manage housing? If so, please provide name, and contact information.

C. FISCAL STABILITY OF THE EVENT/ACTIVITY REQUESTING FUNDING

1.) Amount of Occupancy Tax Funding Requested: \$ 150,000

2.) Ticketed event: YES Price of tickets: \$ 20.00 NO



3.) Does this event provide an opportunity for local discounted community tickets? YES, Price of tickets: \$ _____ NO
anticipate holding a specific locals day with discounted tickets

4.) Total Cost to be borne by the organizer for the event: \$ ~~416,000~~ 416,000

5.) Total amount that the organizer has calculated that needs to be raised to fund/support the event that is currently not available or expected to be available is \$ 0

6) Budget (see Appendix E)

Anticipated Total Cost of the Event (attach COMPLETE budget showing anticipated expenditures and revenue. Please highlight the expenditure breakdown for which you are seeking funding. Failure to provide a complete budget will result in the application being disqualified.)
 \$ 416,000

7.) Anticipated total revenue from the event: \$ ~~595,000~~ 595,000

8.) Clearly identify the special event/activity objectives. (i.e.: the purpose of this event is to create a unique car show which will attract car aficionados from across the Northeast. The purpose of this activity is to create a stronger cultural asset in the region.) Attach additional pages if necessary

The purpose of the event is to carry the popularity of Ice castles' previous events to an event that is not weather dependent.

9.) Previously funded by Warren County Occupancy Tax? YES (amount & # of years): \$ 50,000 # of yrs. 1
 NO

10.) What other non-municipal sources of funding/sponsorships do you anticipate to fund/operate the event/activity?
n/a

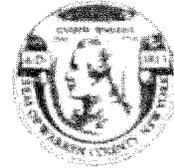
11.) Previously funded by other local municipalities: YES (amount & # of years): \$ _____ #of yrs _____

Municipality? _____

NO
 12.) If the event receives Warren County Occupancy tax funding, is it willing to consider profit-sharing, and if yes at what threshold and what percentage point? n/a

13.) Will the proceeds from the event benefit any other organization or does the event provide an opportunity to support a local charitable organization or group? YES (what %/\$ amount) _____ NO possibly

14.) Please describe community benefit opportunity if answered YES to the previous question:



D. EVENT MARKETING & PROMOTION

1) Marketing Plan (See Appendix D)

Please attach a complete marketing plan and timeline for execution/campaigns to promote your event. Provide details such as how you plan to market your event (print, radio, social media, TV, public relations), where you will place your promotions and advertisements, and what types (posters, flyers, postcards, etc.). Please also include anticipated costs. *Failure to provide a complete marketing plan/timeline will result in the application being disqualified*

2.) When do you anticipate beginning promotion of your event? (pls note that all events awarded funding are highly encouraged to begin promotion of event no less than 90 days prior to event) October

3.) What percentage of your marketing budget is being allocated to outside of Warren County? _____

4.) What geographic areas do you anticipate your marketing reaching (specify local, regional, state, national?)
We receive 3+ billion impressions annually

5.) Who is your target audience and/or demographic?
We reach customers of all ages, and find our target is families with 1-2 children.

6.) **PERMITS AND LICENSES** – please note that in certain cases and with county/municipal- owned properties, certain licenses and permits will be required.

7.) Do you need assistance with the permitting/licensing process? YES NO

8.) What permits and licenses are anticipated for your event? (if unsure, please email hanifink@warrencountyny.gov for further clarification)
Alcohol license

9.) **SAFETY AND LAW ENFORCEMENT NEEDS** (police, fire, EMT, Public Health, DPW, Office of Emergency Services). Please fill out Appendix F.

Do you require these services? YES, if yes, what services and when? Explain. NO

10.) Have you consulted with the appropriate local agencies regarding the public safety impacts of your event? YES NO



AFFIRMATION

I have read the "Warren County Rules and Guidelines," agree to abide by them and attest that all information provided in the Warren County Funding Application is truthful and accurate.

Kyle D. Standiford
Signature of Responsible Party

7/17/2023
Date

Kyle Standiford
Name

CEO
Title

Ice Castles, LLC
Organization



APPENDIX A

LOGO USAGE REQUIREMENTS & LOGO USAGE AGREEMENT

The Warren County Tourism Logo must appear prominently in all advertising and publicity (both written and/or electronic) in order to receive Special Event Marketing Funding.



LOGO APPLICATION/PRINTING INSTRUCTIONS:

- **PRINT/WEB PLACEMENT:** Logo must be separated from other elements by a minimum of .25 inches. The logo must be easy to read by viewer.
- **ONE-COLOR PRINTING:** The entire logo prints 100% black with no screens. Alternatively, the logo may print reversed (knocked out) of any background color to white. No other colors allowed.
- **FOUR-COLOR PRINTING:**

Logo prints 100% with no screens. No color changes allowed.

Please contact Peter Girard at Girardp@warrencountyny.gov for specific logo files or for any placement questions.

AFFIRMATION

I, Kyle Standiford, as representative for Ice Castles, LLC (organization), agree, that I will adhere to all logo guidelines, as designated by Warren County.

Signature

Date 7/17/2023



APPENDIX B

ELIGIBLE AND INELIGIBLE USES OF OCCUPANCY TAX FUNDING FOR COUNTY WIDE EVENTS **

ELIGIBLE USES OF EXPENDITURES

- Paid advertisements: print, radio, television and internet advertisements, email campaigns, social media campaigns promoting events, attractions, activities, packages, conventions, sporting events, tradeshows, encouraging overnight stays
- Outdoor signage/banners/billboards
- Posters/flyers/brochures
- Design, production and placement of out-of-county advertising
- Fireworks displays
- Event-related postage for direct mail campaigns
- Rental or fee of traveling/special exhibits
- Promotional items promoting the event
- Re-enactors, musicians, entertainers, umpires for games
- Maps, free guides tours of regional area, bicycle routes, snowmobile trails
- Hosting/bid fees
- Venue rental, EXCLUDING any and all county/municipal-owned properties
- Event-related rentals & expenditures (tents, chairs, tables, etc.)
- Portable toilets/handwashing stations/public health-related expenses
- Promotional videography, photography promoting the event
- Signage/advertising on trolley/bus promoting the event
- Advertising in trade journals
- Paid brochure distribution
- Production of promotional materials
- Hanging banner ads
- Public relations to promote event
- Insurance
- Event security/emergency Services
- Event-specific website design/development/updates
- Event-specific directional signage
- Event-specific logo design
- Event-specific external marketing services

INELIGIBLE USES OF EXPENDITURES

- Payroll/salaries
- Staff hotel/meals
- Staff travel expenditures
- Alcohol
- Staff mileage
- Annual operating, administrative, and maintenance costs
- Awards to participants
- Capital programs
- Set up/clean-up of event
- Volunteer stipends

**** Please note: This is not an all-inclusive list and expenditure approval is at the discretion of the Warren County Tourism and Occupancy Tax Committee, Legal and County Auditor.**



APPENDIX C
ECONOMIC IMPACT VISITOR SURVEY - Visitor Questionnaire

EVENT NAME: _____ EVENT DATE: _____

What is your zip code? _____

What was the PRIMARY reason for your trip to the Lake George Area?

- Special Event, Business/Convention, Vacation/Leisure, Sporting Event, Visit friends/relatives, Other

How did you travel to the Lake George Area?

- Car, Bus tour/group, Other

How many nights did you stay in the Lake George Area? _____ Nights _____ Day Trip Only

Where are you staying while in the Lake George Area?

- Hotel/Motel, Bed & Breakfast, Vacation Rental/Condo (STR), Campground, With Friends/relatives, Other

Name of Accommodation, (if willing to provide)? _____

In addition to this event, what other activities did you participate in while in the Lake George Area?

- Shopping, Beach, Other, Dining, Cultural & Arts, Outdoor Recreation, Evening Activities

Is this your first time coming to the Lake George Area? Yes, would you return? No

How did you hear about the Lake George Area ?

- Event promotion/advertisement, Radio, Lake George Area newsletter, Friends/family, Hotel/motel/campground staff, VisitLakeGeorge.com, Other

Thank you for participating in our survey!!!



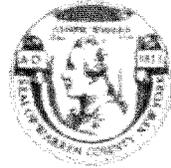
APPENDIX D

MARKETING/ADVERTISING PLAN FORM *(required)*

Event Name: Ice castles Winter Event
 Event Date (and rain date if any): 12/1 - 2/25/24
 Event Type: _____
 Special Comments: _____

Please fill in this form in detail with Estimates and submit at time of application. An updated and detailed Marketing plan form will be REQUIRED after the event as part of the Post Event Final Report. If you use your own spreadsheet, please follow the format below and answer all questions.

	<u>Estimated</u>	<u>Actual</u>
Print Ads	\$ _____	\$ _____ Newspaper (indicate which) _____
	\$ _____	\$ _____ Magazine (indicate which) _____
	\$ _____	\$ _____ Brochure (indicate distribution) _____
	\$ _____	\$ _____ Direct Mailer (indicate distribution) _____
	\$ _____	\$ _____ Other print advertising: _____
Digital Ads	\$ <u>2,500</u>	\$ _____ Google Display/Search Engine Marketing
	\$ <u>2,500</u>	\$ _____ Facebook
	\$ <u>2,500</u>	\$ _____ Instagram
	\$ _____	\$ _____ Other social media _____
	\$ _____	\$ _____ Purchased email lists
	\$ _____	\$ _____ Other digital advertising _____
Billboards/Outdoor Advertising	\$ _____	\$ _____ Billboard/banner
	\$ _____	\$ _____ Poster
	\$ _____	\$ _____ Other Outdoor Advertising
Other Advertising Expenses	\$ <u>1,000</u>	\$ _____ Radio, TV (indicate stations)
	\$ _____	\$ _____ Creative Design
	\$ <u>1,500</u>	\$ _____ Other advertising expenses
TOTAL EVENT MARKETING/ADVERTISING EXPENSES	\$ <u>10,000</u> (estimated)	\$ _____ (actual)



- 1) When will your event marketing campaign begin/end? Oct - Feb
- 2.) How do you plan to promote your event? What print, electronic and social media do you plan to use and how?
We advertise mainly on social media. We have a lot of PR experience with local news outlets that highlight these events for free. We will work together with other local events to coordinate marketing efforts
- 3) Where are you targeting your event marketing geographically? Where are your target audiences? (for example, do you plan to market your event to the Capital Region, New England, etc)
Warren county, Albany, Syracuse areas and all in between. Some marketing farther south in NY
- 4) Who is the primary audience you are trying to attract with your event (i.e. families, auto enthusiasts, food/wine enthusiasts, cultural travelers, etc)
Families who are looking for interesting and new winter activities
- 5) What opportunities do you foresee with your event to collaborate your marketing efforts with Warren County Tourism to help promote your event (i.e. joint press events, cross marketing on social media, etc).
We plan to work closely with local tourism boards to coordinate our marketing efforts

Ice Castles, LLC
Lake George Winter Event
July 2023

Cost Category	Amount
Construction Materials, Supplies, and Tools	80,500
Utilities	5,000
Equipment Rental, Maintenance, Fuel, etc.	106,000
Total Compensation	138,500
Event costs (ticketing equipment, signage, supplies, materials)	44,000
Insurance	15,000
Marketing/Advertising	10,000
Travel	5,000
Admin and Other	12,000
TOTAL	416,000

** Fore estimation purposes only



APPENDIX F

Warren County Emergency Services Event Request

Welcome to the Lake George Area. We are thrilled you have selected our area for your event and would like to work collaboratively with you to ensure that your event is the safest it can be for you and your attendees. Please take a few moments to fill out the form below so that we may coordinate with you for any emergency services needs you may have. If you have specific questions regarding the safety of your event or emergency services options, please email EventsEMS@warrencountyny.gov

Name of Event: _____

Dates of Event: _____

Number of attendees expected (Adult/youth): _____

Host Municipality/Location: _____

Brief Description/nature of the event (type, motorized, non-motorized, specific location):

Main Organization Point of Contact:

Name: _____

Organization: _____

Phone: _____

Email: _____

What emergency services do you require (police, fire, EMT, emergency services, road closures, police details, etc.)?

RESOLUTION REQUEST FORM NO. 20

MISCELLANEOUS

****Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.
Please attach any backup information available and be as detailed as possible.***

DEPARTMENT NAME: Tourism (Occupancy Tax)

DATE: 7/25/23

- (a) Purpose of Request: to approve a contract for occupancy tax funding for Ice Castles Winter Event

- (b) Details:

- (c) Previous Resolution Number: none

- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: A.6417.0002 480 - Tourism - Special Events - \$150,000

Sample: A.8021 470 Planning & Community Development – Contract

* as listed in budget and LOGOS

RESOLUTION REQUEST FORM NO. 20

MISCELLANEOUS

****Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.
Please attach any backup information available and be as detailed as possible.***

DEPARTMENT NAME: Tourism (Occupancy Tax Coordination Committee)

DATE: 7/25/23

- (a) Purpose of Request: to appropriate \$150,000 from the Occupancy Tax Reserve to A.6417.0002 480

- (b) Details: Funding is for Ice Castles Winter Event

- (c) Previous Resolution Number:

- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: A.881.00 Reserve - Occupancy Tax - 150,000

Sample: A.8021 470 Planning & Community Development – Contract

* as listed in budget and LOGOS