TRADE SUPPORT SCHEME SITE INSPECTIONS



APPLICATION FORM





IMPORTANT

1.

Application Information

Before completing this form, please read the Site Inspection Guidelines.

Note if you are requesting funding for more than one site inspection/group, please complete a separate application for each.

a)	Name of Applicant (DMC):
b)	Name of Group:
c)	Applicant Category (please tick as appropriate): o DMC o PCO o Other: (Please specify)
d)	Address:
e)	Contact Person: Name:
f)	Position: Phone Number: Fax Number:
g)	Email Address:
2.	Site Inspection Details
a)	From which overseas market?
b)	Name of Group:
c)	Objective of Inspection/Trip:
(d)	Has the respective Tourism Ireland market office been informed? If so, which one and who?





	(e)	Regions to be included in itinerary (please tick as appropriate)
		o Dublin o Ireland West o South East o North West
		o South West o East Coast & Midlands o Shannon
		Please attach your proposed itinerary including information about hotels for overnight stays, hotels to be visited, coaching companies to be used, guides and restaurants.
	(f)	Participants Details (please tick as appropriate)
		o Corporate Buyer o Incentive House o Assoc. Conference
		o Tour Operator o Other (Please specify)
Name		Job Title Contact email address
	If mor	re please attach a complete list separately. This does not include staff.
		Total Number of Participants:
	(g)	What date(s) is the site inspection taking place? From: To:
	<u>3. Fu</u>	<u>nding</u>
	(a)	Please provide a breakdown of your projected costs:
Expen	se Cate	egory Description Estimated Expenditure Fáilte Ireland's Use Only

Expense Category	Description	Estimated Expenditure	Fáilte Ireland's Use Only		
		€	Level of	Amount	
			Support %	Recommended	
Accommodation					
Transportation					
Guiding					
Meals					
Other					
	Total:				

^{*}Please outline the costs that are complimentary or sponsored (attach details to application if appropriate)





(b) What additional funding are you receiving for this site inspection?

Source:	Amount:

<u>4.</u>	Other Information	
(a) '	hen is the incentive/meeting/event taking place?	
Yeaı	Month Dates (if known)	
(b)	What is the expected number of participants in the actual group, if confirmed?	
(c)	Vhat is the estimated value of this business to Ireland?	
Plea	e provide any additional information that you feel may support your application:	





<u>Disclosure of Information - Freedom of Information Act</u>

Fáilte Ireland wishes to advise applicants that, under the Freedom of Information Act 1997 and Amendment 2003, the information supplied in the application form may be made available on request, subject to Fáilte Ireland's obligations under law.

If you consider that none of the information supplied by you is sensitive, please complete the statement below to that effect. Such information may be released in response to a Freedom of Information request.

Name of Applicant:			
hereby agrees that none of the information supplied is sensitive, and any, or all, of the information supplied, may be released in response to a Freedom of Information request.			
AGREE:			
Signed:			
Position: Date:			
You are asked to consider if any of the information supplied by you in this application should not be disclosed because of sensitivity. If this is the case you should, when providing the information, identify same and specify the reasons for its sensitivity. Fáilte Ireland will consult with you about sensitive information before making a decision on any Freedom of Information request received.			
DISAGREE:			
Signed:			
Position: Date:			

It will be a condition of any application for funding under the terms and conditions of the Fáilte Ireland Trade Support Scheme that the applicant has read, understood and accepted the following:

- 1. Fáilte Ireland shall not be liable to the applicant or any other party, in respect of any loss, damage or costs of any nature arising directly or indirectly from:
 - a) the application or the subject matter of the application
 - b) the rejection for any reason of any application.
- 2. Fáilte Ireland shall not be held responsible or liable, at any time in any circumstances, in relation to any matter whatsoever arising in connection with the administration of activities.



Disclaimer - please read carefully



<u>Applicant's Statement</u> <u>This must be signed and dated otherwise claim is void.</u>

I/we certify that I/we read and understood the guidelines and criteria applicable to the Fáilte Ireland Trade Support Scheme and agree to comply in full therewith. I/we certify that all information provided in this application, and all information given in any documentation submitted in support of the application is truthful and accurate.

Signed:
Date:
Name (in block capitals):
On behalf of (organisation's name):
Assessment
Fáilte Ireland's Use Only
Recommendation (complete section 3): Total (E):
Recommendation Basis:
Contacted Tourism Ireland : o Yes o No
(Details if yes):
Recommended by: Date:
Approved by: Date:

Completed forms to be forwarded to:

Site Inspections - Application Form Business Tourism Unit Fáilte Ireland Amiens Street Dublin 1

Tel: + 353 1 884 7700 Fax: + 353 1 855 6821

E-Mail: roisin.gaffney@failteireland.ie





www.meetinireland.com



