



# Match on Main FY 2025 Local Business Worksheet

Appendix C

## Introduction to the Match on Main Local Business Worksheet

Welcome! You are about to start the application process for the Match on Main Grant, aimed at energizing and transforming downtown areas through impactful small business projects. This section gathers essential information about your business and the visionary project you propose. The insights you provide here will help us understand your commitment to enhancing local vibrancy and economic health. Follow the steps outlined, ensuring you attach all required documents and detailed project information. Let's begin your journey towards making a significant mark on your community.

## **Completing the MEDC Match on Main Local Business Worksheet**

Eligible small business applicants are encouraged to use this provided template and gather all necessary attachments (see the list below) before starting this application worksheet. The following documents **must** be submitted along with the application for consideration of the Match on Main Grant.

- Project Cost Estimates from a third party that reflect total private investment. Private investment includes any non-Match on Main funds that will be leveraged to implement the project within 12 months of an executed grant agreement. All costs associated with the proposed project should be reflected in the required third-party cost estimates.
- A minimum of three photos that represent the scope of Match on Main request; this should include at least one exterior photo and at least one photo of the interior of the space (acceptable file types: PNG, JPEG, and PDFs).
- REQUIRED FOR NEW BUSINESSES: For businesses in operation 12 months or less, a copy of a
  detailed Business Plan that has been reviewed by a third-party small business resource provider,
  such as the Michigan Small Business Development Center (MI-SBDC). At a minimum, the Business
  Plan should include an executive summary, company introduction, description of products or
  services offered, an overview of operations, and a two-year projected cash flow. (If the business
  has been in operation for more than 12 months, this attachment is OPTIONAL.)

## **Business & Project Specific Information**

Please answer the following questions below for the Match on Main application that will be submitted on your behalf by the eligible applicant (Ishpeming Downtown Development Authority or Ishpeming DDA). Questions and attachments in this worksheet will be used to evaluate the entire application. The eligible applicant is also required to submit information that will help the MEDC determine eligibility of the community and the project.

This application has been updated to enhance clarity and usability, featuring illustrative examples relevant to potential projects and community impact. Applicants are encouraged to provide detailed responses specific to their own project, rather than relying solely on the provided examples. Please note that these updates are intended to assist in the application process and do not affect the scoring criteria.

## **Business Information**

Contact Information									
First Nam	e:		Last Name	e:					
Cell Num	ber:			Office Number:					
Email:						<u>.</u>			
Preferred	b	🗆 Email		Cell Phone			🗆 Of	fice Phone	
Business	Business Role: 🗌 Owner 🗌 Emp			nployee	Other	Other: Please describe your role below:			
Please describe your role below:(i.e. manager)									
		C	Commun	ity Informa	tion				
Ishpemin	g Downtown De	velopment Au	thority (	Ishpeming	DDA):				
		Gen	eral Bus	iness Infor	mation				
Legal Busi	iness Name:								
DBA (if ap	DBA (if applicable):								
Street Ad	dress:								
City:			Zip Code:						
Employer Identification Number (EIN):									
Date of Business Formation (filed with LARA):									
For existing, when did the business open?				mm/year					
If new, when will the business open?									
Are you a sole proprietor?				Yes     No			□ No		
Business Type: 🛛 Retail						🗆 Other			
	Please select th	e 4-digit NAIC	S Code t		-	-	ness/ir	ndustry	
Retail/Sto	ores			Restaur	ants / Fo				
4221	Furniture			7223		Special Food Services (Food Truck)			
4422	Home Furnish	•		7224		Limited Service: Taverns, Bars, Bakeries,			
4452	Specialty Food				Delis, Candy, Ice Cream				
4461	Health & Pers	onal Care	7225		Full Service – Dine In				
4482	Shoes	Service Related							
4483	Jewelry, Luggage, Leather Goods			5411		Legal, Title Company			
4511	Sports, Hobby, Musical Instruments			5412		Accounting			
4512	Books			8121		Personal Care (Salons, Barbers, Spas)			
4523	General Merchandise			8129		Pet Care (excluding Veterinary)			
4531	Florists			6211		Health Care			
4532	Gifts, Novelty, Souvenir			7139	Exercise & Wellness				
4539	Other - Miscellaneous				(Amusement, Recreation)				
Other	Please Describ	e:							

Is the business a for-profit entity?	□ Yes			🗆 No		
Is the business headquartered in Michigan?	🗆 Yes			🗆 No		
How many current FULL-TIME employees does the	business curren	tly have. W	rite "1" i	f		
sole proprietor						
How many NEW jobs are estimated because of this	s project?	Full Time:				
Please indicate the number of full-time and part-time e	mployees expecte	d to be adde	d as a resi	ult of this		
project. Note: This information is gathered solely for de	mographic purpos	ses and will r	not influen	ce the sc	oring	
criteria for the Match on Main (MoM) grant.	-					
	ess Informatio					
s the business a brick-and-mortar storefront with face-to-face operations					No	
located within the community's traditional downto	wn, historic					
neighborhood commercial corridor, or an area plar	nned and zoned	for				
concentrated commercial district?						
What is the total square footage of any <b>NEW</b> (curre	ently vacant or					
underutilized) space being activated?		Interio	r Ex	terior		
How long has the space being activated been vacar	nt or underutilize	ed?				
New Busines	s Information					
Is the business a brick-and-mortar storefront with	face-to-face ope	erations	🗆 Yes		No	
located within the community's traditional downt	own, historic					
neighborhood commercial corridor, or an area pla	nned and zoned	for				
concentrated commercial district?						
What is the total square footage of any NEW (curr	ently vacant or					
underutilized) space being activated?		Interio	r Ex	terior		
How long has the space being activated been vaca	int or underutiliz	ed?				
<ul> <li>New businesses (operating 12 months or less) of business plan that has been reviewed by a third the Match on Main application.</li> </ul>		•				
• Existing businesses (in operation more than 12 plan as part of the project application.	-					
Reference the Match on Main Program Guide f	or Business Plan	elements ti	hat need	to he ind	lude	

• Reference the Match on Main Program Guide for Business Plan elements that need to be included.

# **Project Information**

## **Project & Private Investment**

#### Budget

- Provide a detailed list of all items and cost of the work to be performed or the items to be purchased that will support a reimbursement request from the Match on Main dollars. Be specific by providing vendor, items and quantity, and cost.
- Third-Party Project Cost Estimates are **REQUIRED**. All costs associated with the proposed project should be reflected in the required third-party cost estimates.

	Vendor Item Description			Cost		
A: Total MoM Grant Sought (including 10% Match):						
B:	B: Total Expenses Not Covered By The Grant:					
C:	C: Total Project Cost:					
D:						
E: Total Private Investment:						
Private investment includes any non-Match on Main funds that will be leveraged to implement the project within						
12-months of an executed grant agreement. (The difference between the total project cost less the grant						
amount)						
Private Investment						
How will the Private Investment be funded? (Check all that apply) <ul> <li>Personal Savings</li> <li>Bank Loan</li> </ul>						
	Friends & Family			Other Grants		
	Credit Cards		$\boxtimes$	Other (Please describe)		

Please describe how you will fund the gap between the Grant amount awarded and the total cost of the project:

## **Community Impact**

How will this project contribute to the local community:

#### Examples:

Increase local employment by providing [\_\_\_\_] new jobs.

Boost local economy by attracting an estimated [\_\_\_\_] additional visitors per month.

Improve local infrastructure/utilities which benefits [\_\_\_\_\_] residents.

Revitalize underused/vacant properties, affecting [\_\_\_\_] properties.

Enhance community services by adding [a park, a community center, educational workshops].

## **Business Impact**

How will this project benefit your existing business:

Examples:

Increase annual revenue by [10%, 20%, 30%]. Expand customer base by [20%, 50%, 100%]. Diversify products/services offered, adding [1-3, 4-6, 7+] new types.

How will this project bring innovation and creativity to the area:

#### Examples:

Introduce a new business model (e.g., cooperative, nonprofit, subscription-based).

Utilize new technology or platforms for customer engagement.

(e.g., digital marketing tools, automated POS systems)

*Offer unique products/services not currently available in the community.* 

Collaborate with local artists/creatives to enhance aesthetic appeal or community engagement.

## How will this project attract residents and visitors:

#### **Examples:**

Host special events that are expected to draw [\_\_\_\_] attendees per event. Offer unique attractions or amenities (e.g., rooftop dining, outdoor entertainment). Partner with local tourism boards or businesses to promote area-wide attractions.

## How will Match on Main funds impact your business?

**TIP:** Describe any other tools, activities, technical assistance, or financial resources investigated to support this project and/or business operations. This may include other funding programs, owner-led improvements, traditional financing, local grants, analyzing the cost/benefit of the investment, consultation with local small business resource providers, market data, or national trends/ best practices. Why did you pursue or not pursue these avenues of technical assistance, business resources, financial resources, etc.?

How will the execution of the proposed project result in business growth? Provide specific example(s):

**Example:** By converting underutilized outdoor space into an additional seating area, the store can accommodate more customers, especially during peak hours or seasons. This expansion directly increases sales capacity, allowing the business to serve a larger number of customers without significant increases in wait times.

Describe how the proposed project will result the activation of underutilized or vacant space. Will the project increase efficiencies in operations? Please provide specific example(s):

**Example:** A small community bookstore plans to use grant funds to transform a currently underutilized storage area into a multi-functional space. This renovation includes purchasing modular furniture and high-quality lighting to create a flexible space that can serve as a reading area, a venue for book signings and literary events, and a workshop space for community classes. This strategic utilization of space not only maximizes the bookstore's square footage but also attracts more customers by offering additional services and events. As a result, the bookstore can increase its operational efficiency by hosting multiple revenue-generating activities in the same area, improving customer retention and boosting sales.

## **Checklist and Required Attachments**

#### Please initial below to confirm:

\_\_\_\_\_ I verify that I have NOT previously been awarded Match on Main funding (excluding the Match on Main – COVID-19 Response Program). Initialing here confirms my understanding and assertion that I am eligible to apply under this condition.

#### Please initial below to confirm:

\_\_\_\_\_ I have read and understand the Program Guidelines concerning ineligible business types. I confirm that my business does not fall into any of the following categories: franchises, businesses located in strip malls, "big box" retailers, businesses whose primary sales come from marijuana, CBD, tobacco, or any other businesses deemed ineligible by the MEDC. Initialing here affirms that my business is eligible to participate in the Match on Main Program.

#### Initial to Confirm Understanding of Program Details:

\_\_\_\_\_ I understand that I am required to review the Match on Main Program Guide prior to completing the Local Business Worksheet. I acknowledge that I have accessed and reviewed the guide available at <u>Match on</u> <u>Main Program Guide</u>.

\_\_\_\_\_ I understand that the Match on Main is a reimbursement grant program provided to local units of government, downtown development authorities, or other downtown management or community development organizations. These entities administer funds on behalf of the small business that I represent.

\_\_\_\_\_ I understand that, if awarded, I will be required to enter into a sub-grant agreement with the small business being supported, and I commit to adhere to the terms and responsibilities outlined in this agreement.

## **Required Attachments:** Third-Party Cost Estimate:

Gather and submit a project cost estimate for proposed work that includes scope and total cost in a separate document.

Photos:

At least three photos representing the scope of Match on Main request (including at least one exterior photo and at least one photo of the interior of the space

Upon application completion, please submit to Rachel Raak, Lake Superior Community Partnership, 101 W. Washington St., Marquette, Mi 49855, or via email to <u>rachel@marquette.org</u> no later than Friday, February 14, 2025, at 5 pm.