

2026

MATCH on MAIN

APPENDIX C – LOCAL BUSINESS APPLICATION WORKSHEET – ISHPEMING, MI



**MICHIGAN
ECONOMIC**
DEVELOPMENT
CORPORATION

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Match on Main – Local Business Worksheet Application Instructions

Match on Main is a competitive grant program supported by the Michigan Economic Development Corporation (MEDC) and delivered in partnership with participating Michigan Main Street and Redevelopment Ready Communities. The program supports projects that strengthen local downtowns and commercial districts through placemaking and revitalization efforts.

This application helps your community and MEDC understand your business and the project you are proposing. Please answer each question as fully and accurately as possible.

Local communities review applications and may forward a limited number to MEDC for state-level consideration. Final funding decisions are made by the Michigan Strategic Fund through its Joint Evaluation Committee (JEC).

Completing this worksheet or being selected by a local community does not guarantee an award.

Community Coordination Requirement

Match on Main is administered locally through participating Select or Master Level Michigan Main Street (MMS) and Essentials or Certified Redevelopment Ready Communities (RRC). Small businesses must work directly with their local community program to be considered for Match on Main funding.

Before completing and submitting this application, please contact your local community representative to discuss your project and confirm next steps.

Community Information

This application will not be considered without a community point of contact.

Name of the Community:

Community Program

Select all that apply:

MMS

RRC

Master Level

Essentials

Select Level

Certified

Community Point of Contact

Title:

Street Address:

City:

State: MI

Zip:

Telephone:

Email:

Before You Begin: Michigan Business Registry Number (LARA)

Effective for the 2026 Match on Main program, all applicant businesses must be legally registered with the [State of Michigan](#) Department of Licensing and Regulatory Affairs (LARA) prior to receiving an award.

Step 1 — Check your business name availability (recommended)

- Use the State’s business entity search to see if your desired name is available.
- Business Entity Search: <https://www.michigan.gov/corpenitysearch>

Step 2 — Optional: Reserve your business name if time is a constraint

If you are not ready to form your business entity yet, you may reserve a name while you prepare your filing.

- Typical fee: \$25
- Reservation period: 180 days (about 6 months)
- Forms & instructions: <https://www.michigan.gov/lara/bureau-list/cscl/corps/forms>

Step 3 — Form your business entity (most commonly an LLC)

Most small businesses register as a Limited Liability Company (LLC) by filing Articles of Organization with LARA.

- LLC filing fee: \$50 (one-time)
- Typical processing time (online): ~7–10 business days
- Expedited processing is available for an additional fee (options vary).
- File online: <https://www.michigan.gov/lara/corpfiling>

Step 4 — Stay in good standing (ongoing requirement)

After formation, LLCs must file an Annual Statement to remain active and in good standing.

- Annual Statement fee: \$25/year
- Annual filing info:

<https://www.michigan.gov/lara/bureau-list/cscl/corps/limited-liability-co/filing-requirements-continued/annual-filings>

Step 5 — Match on Main FY26 award condition

Businesses may apply while still completing registration; however, registration with the State of Michigan is required prior to grant awards. If awarded, the business will be required to provide proof of active registration and good standing.

Business Point of Contact

Point of Contact (First and Last Name):

Email Address:

Business Phone Number:

Mobile Phone Number:

Preferred Method of Contact:

- Email
- Business Phone
- Mobile Phone

Relationship to the

Business (Select One)

- Owner
- Authorized Representative (manager, executive director, or staff)
- Consultant or Project support
- Other (please describe):

Business Entity Information

Legal Business Name:

DBA (if applicable): Street

Address:

City:

State: MI

Zip Code:

REQUIRED: Michigan Business Registry Number (LARA):

Business Type

(Select one)

- | | |
|--|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Sole Proprietor |
| <input type="checkbox"/> Limited Liability Company (LLC) | <input type="checkbox"/> Nonprofit Organization |

Primary Business Activity

(Both entity types are eligible for Match on Main)

- | | |
|--|---|
| <input type="checkbox"/> For-profit business | <input type="checkbox"/> Nonprofit organization |
|--|---|

Michigan Headquarters Requirement

(Businesses must be headquartered in Michigan to be eligible for Match on Main.)

Is the business headquartered in Michigan?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

Business Start Date

When did the business open?

If the business is not yet open, when does it plan to open? Planned opening date:

Business Plan Requirement

New businesses (operating for 12 months or less) are required to submit a detailed business plan that has been reviewed by a third-party small business resource provider as part of the Match on Main application.

Existing businesses (in operation for more than 12 months) may optionally submit a business plan as part of their application. If provided, the business plan should include the elements outlined in the Match on Main Program Guide.

Business Type

- | | |
|-------------------------------------|----------------------------------|
| <input type="checkbox"/> Retail | <input type="checkbox"/> Service |
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> Other |

If Other, please describe:

NAICS - North American Industry Classification System

NAICS codes are used by MEDC for statewide and regional reporting purposes only and are not used to determine eligibility or scoring for Match on Main. Does your business align with any of the following statewide industry focus areas? (Select all that apply)

- Food & Beverage / Agribusiness
- Tourism & Hospitality
- Retail Trade
- Health & Wellness
- Personal & Professional Services Technology / Digital Services
- Arts, Culture, & Creative Economy
- Light Manufacturing / Maker / Artisan
- Other (please specify below):

Job Information

How many employees does your business **currently** have?

Full time:

Part time:

How many NEW jobs will be **created** by your business as a result of this project?

Full time:

Part time:

Business Space

Total Business Space

What is the total square footage of the space the business currently occupies or will occupy after the project is completed?

- Includes interior space only
- Includes interior and outdoor space (if applicable)

Interior Square Footage

(Do not include patios, outdoor seating, or exterior areas.)

What is the total square footage of the interior space the business occupies or will occupy after project completion?

Vacancy / Underutilization

Prior to this project, how long was the space unused or underutilized?

- | | |
|---|--|
| <input type="checkbox"/> Less than 6 months | <input type="checkbox"/> More than 3 years |
| <input type="checkbox"/> 6–12 months | <input type="checkbox"/> N/A (space was continuously occupied) |
| <input type="checkbox"/> 1–3 years | <input type="checkbox"/> Unknown |

Business Location

Is your business a brick-and-mortar storefront with face-to-face operations located within your community’s traditional downtown, historic neighborhood commercial corridor, or an area planned and zoned for concentrated commercial district?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

Does the business lease the space it resides in?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

If yes, what is the remaining lease term?

Does the business or business owners own the building?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

Do you currently have site control for the proposed project location?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

Please describe the form of site control (e.g., ownership, lease, landlord permission).

What is the current taxable value of the property?

How Grant Funds Will Be Used

Select all that apply

Interior or Exterior Design & Planning

Design services such as floor plans, renderings, layout concepts, or construction drawings for interior or exterior spaces.

Building Improvements & Equipment

Permanent interior renovations or upgrades, including flooring, walls, lighting, electrical work, furniture, fixtures, kitchen or production equipment, or code compliance improvements.

Outdoor Space Activation

Creation or enhancement of outdoor spaces such as patios, dining areas, beer gardens, or other place-based activations, including related doors, windows, or exterior signage when part of a larger outdoor project.

Technology & Business Automation

Investments in technology that improve business operations or customer experience, such as point-of-sale (POS) systems, e-commerce integration, online ordering, digital scheduling, inventory management, CRM tools, or other automated systems.

Examples include systems that automate sales, inventory, scheduling, payments, or customer management.

Marketing & Customer Engagement

Marketing and branding expenses including upgrades, digital marketing, signage, customer outreach tools, and /or other efforts to attract and retain customers.

Inventory & Working Capital

Inventory purchases or other working capital expenses necessary to support business operations or expansion.

Project Scope

Please describe the project you are seeking Match on Main funding for. Include the specific activities or expenses the grant funds would support.

Explain how your proposed project aligns with the budget and cost estimates included in this application and describe why Match on Main funding is necessary to move the project forward.

Project Start Date:

Estimated Project Completion Date: (Projects must be completed within 12 months of the executed grant agreement, unless an extension is approved.)

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Project Details:

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Project Details:

Project Budget & Private Investment Totals

Total Projected Project Cost:

The total cost of your project, including all expenses related to the work being proposed.

\$

Total Match on Main Grant Requested:

The amount of grant funding you are requesting through Match on Main.

(Maximum award: \$25,000)

\$

Required Business Match (10%):

A minimum business contribution equal to 10% of the requested grant amount.

(Example: A \$25,000 grant request requires at least a \$2,500 match.)

\$

Additional Business (Private) Investment:

Any additional funds you plan to invest in the project beyond the Match on Main grant and required 10% match. This may include owner funds, loans, or other private financing used within 12 months of executing the Match on Main agreement.

This field may be \$0 if the project is limited to the grant and required match.

\$

Please Specify the Source(s) of your Additional Private Investment:

Describe the origin of the additional funds, such as personal investment, loans, or other grants.

How These Numbers Work Together

Total Project Cost = Grant Request + Required Match + Any Additional Business Investment

All project-related costs should be supported by third-party cost estimates (such as contractor quotes, invoices, or pricing documentation). Please complete the budget worksheet.

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.

Narrative Questions

Please respond clearly and concisely. Specific examples are encouraged.

Question 1: Business & Place Impact

How will this project improve your business and contribute to the surrounding downtown or commercial district?

Describe the expected impact on customers, foot traffic, visibility, services offered, or the overall experience of the area.

Question 2: Use and Activation of Space

How will this project improve the use of interior or exterior space?

Describe how the project will activate vacant or underutilized space, improve layout or accessibility, or create a more welcoming and functional environment for customers and the community.

Question 3: Operational Efficiency & Modernization

How will this project improve the day-to-day operations or modernize your business?

Examples may include technology or automation, workflow improvements, equipment upgrades, or changes that reduce operating barriers and improve efficiency.

Question 4: Community Alignment

How does this project align with the goals or vision of your downtown or commercial district?

Describe how the project supports broader community goals such as revitalization, vibrancy, small business sustainability, or filling a gap in the local market.

Additional MEDC Program Requirements

Match on Main is a reimbursement based grant program administered through local units of government. Please verify that you have NOT received or been approved to receive support from a previous round of the Match on Main program.

- Yes, I have received Match on Main funding previously.
- No, I have not received Match on Main funding previously.

Ineligible Business Types: The Program Guidelines outline a number of ineligible business types including franchises (including independent contractor agreements), businesses located in strip malls (unless located in an area zoned and approved for future concentrated mixed-use development), “big box” retailers, businesses whose primary sales come from marijuana, CBD, tobacco, and/or any other businesses deemed ineligible by the MEDC.

- I understand
- I do not identify as an ineligible business

Program Guide: The Match on Main Program Guide should be reviewed by the business owner prior to completing the Local Business Application Worksheet.

- I have reviewed the MoM Program Guide

Reimbursement Grant Program: 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 who administer funds to the small business that applicant applied on behalf of.

- I understand

Sub-grant Awards: Grantees will be required to enter into a sub-grant agreement with the small business being supported.

- I understand

Compliance & Post-grant Reporting: If awarded, businesses will be required to complete compliance requirements and post-grant reporting.

- I understand

Required Attachment – Third Party Cost Estimate: I have gathered and will submit a project cost estimate for proposed work that includes scope and total cost in a separate document.

- I have included these as part of my application submission

Required Attachment – Photos: I have provided a minimum of three photos that represent the scope of Match on Main request (including at least one exterior photo and at least one photo of the interior of the space).

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I have included these as part of my application submission

****Upon application completion, please submit to:**

Lake Superior Community Partnership

Attention: Rachel Raak

rachel@marquette.org

(906) 226-6591

Deadline for submissions is Wednesday, March 18 at 5:00 pm.