MICHIGAN ECONOMIC DEVELOPMENT CORPORATION

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 (Main Street, DDA, Redevelopment Ready Community). 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 Name:		Last Name:	
Cell Number:		Office Number:	
Email:			
Preferred	☐ Email	☐ Cell Phone	☐ Office Phone
Business Role:	☐ Owner ☐ Employee	☐ Other: Please describe your role below:	
Please describe your role below:(i.e. manager)			

Community Information
Insert Name of Municipality/DDA/Main Street Organization:

General Business Information			
Legal Business Name:			
DBA (if applicable):			
Street Address:			
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	
Business Type:	☐ Retail ☐ Restaurant	☐ Service	☐ Other

Please select the 4-digit NAICS Code that best represents your business/industry

Retail/Stores		**Restaurants / Food**	
4221	Furniture	7223	Special Food Services (Food Truck)
4422	Home Furnishings	7224	Limited Service: Taverns, Bars, Bakeries, Delis, Candy, Ice Cream
4452	Specialty Food		
4461	Health & Personal 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 (Amusement, Recreation)
4539	Other - Miscellaneous		
Other	*Please Describe:*		

Please list the NAICS code that aligns with your business below:

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 currently have. Write "1" if sole proprietor						
How many **NEW** jobs are estimated because of this project?	Full Time:			Part Time:		
Please indicate the number of full-time and part-time employees expected to be added as a result of this project. Note: This information is gathered solely for demographic purposes and will not influence the scoring criteria for the Match on Main (MoM) grant.						
Existing Business Information						
Is the business a brick-and-mortar storefront with face-to-face operations located within the community's traditional downtown, historic neighborhood commercial corridor, or an area planned and zoned for concentrated commercial district?	☐ Yes			☐ No		
What is the total square footage of any **NEW** (currently vacant or underutilized) space being activated?	Interior			Exterior		
How long has the space being activated been vacant or underutilized?						
New Business Information						
Is the business a brick-and-mortar storefront with face-to-face operations located within the community's traditional downtown, historic neighborhood commercial corridor, or an area planned and zoned for concentrated commercial district?	☐ Yes			☐ No		
What is the total square footage of any **NEW** (currently vacant or underutilized) space being activated?	Interior			Exterior		
How long has the space being activated been vacant or underutilized?						

- *New businesses (operating 12 months or less) are **REQUIRED** to provide a copy of 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 more than 12 months) have the **OPTION** to provide a business plan as part of the project application.*
- *Reference the Match on Main Program Guide for Business Plan elements that need to be included.*

Project Information

Scope
Please provide a brief description of the project including specific activities or expenses, how the project scope aligns with budget and cost estimates provided, and why Match on Main funds are needed.
Tip: Does your project • *Align with the goals of the community/downtown?* • *Improve the local area for residents and visitors?* • *Introduce innovative or creative elements and dynamic space?* • *Have the potential to attract visitors or enhance community engagement?*

Eligible Activities Being Considered	
☐	Technical Assistance
☐	Interior Building Renovation
☐	Permanent or semi-permanent activation of outdoor space
☐	General marketing and/or technology
☐	Other:
Proposed Start Date:	
Proposed Completion Date:	

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**
	Total Projected Project Cost:	
	Total Grant Requested:	
	10% Match:	
	Private Investment Required:	
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)*			
☐	Personal Savings	☐	Bank Loan
☐	Friends & Family	☐	Other Grants
☐	Credit Cards	☐	Other (Please describe

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 examples:
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 examples:
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 Match on Main Program Guide.*

___ *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 your local Municipality/DDA/Main Street Organization.

This Business Worksheet is due to MMDC on March 26th, 2025
info@mmdc.org