

OWOSSO MAIN STREET & DOWNTOWN DEVELOPMENT AUTHORITY REVOLVING LOAN & GRANT PROGRAM

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GRANT APPLICATION

Before completing/submitting this application, please contact lizzie.fredrick@ci.owosso.mi.us. The OMS & DDA Economic Vitality Committee can help answer any questions or concerns associated with the application and review process.

Applicant Information

Name:			
Address:			
Phone:	Business	Mobile	Home
Email:			
Property Information			
Owner entity name:			
DBA (if different):	EIN # (if applicable):		
Address:			
Phone:			
Type/Category of property:			
Tax classification of owner entity:			
Corporation LLC P	artnership	ship S-Co	orp 🔲 Individual
Property is: Vacant Occupi	ed – list tenants:		
Facility/Building is: Owned	Leased Rented	Other – expla	in:
Property is: Owned by business	S Owned by applican	t Owned b	by other:
Square footage currently occupied:			
Square footage activated as a resul	t of project:		

Financial Information Amount of financing already secured for project: Source of funds: Cash investment by applicant and/or other owners: List of other investors/owners (if applicable): Name: _____ Name: Name: _____ Name: ____ **Eligibility Criteria** Check all that apply. Business and/or property is located within approved zones Business is headquartered in Michigan Business is not a franchise, located in a strip mall, a "big box" retailer, or a business whose primary sales come from adult entertainment, marijuana, CDB and/or tobacco Applicant will have control over the site for which they are applying for prior to the loan or grant approval (excluding acquisition projects) Applicant has not received funds from the Revolving Loan & Grant Program within the last 24 months Applicant is not in default with the City of Owosso including but not limited to taxes, utilities, special assessment, invoices, permits, and loan payments Applicant, or any LLC associated with the applicant, has not filed for bankruptcy Applicant is not on the Owosso City Council, Owosso Main Street & Downtown Development Authority Board of Directors, or OMS & DDA Economic Vitality Committee **Grant Request Information** Check all that apply. Note: Grant maximum per project/building is \$50,000 Architecture Services (maximum amount varies by project type) Elevator (up to \$25,000 per building) Fire Suppression (up to \$25,000 for projects with two or more upper floor residential units)

☐ Vault Fill-In (up to \$12,000 per building)

Professional Services-Access Study (up to \$5,000 per building)

Total development cost: \$	Total grant amount requested: \$
Estimated start date:	Estimated completion date:
Will the grant create new residential unit	ts?
Will grant redevelop existing residential	units?
Will the completion of this project be det	termined by the grant award?
No Yes – Please pi	rovide proof (via pro-forma)
Provide a detailed project description: _	

No-Cost Small Business Support

The Michigan Small Business Development Center provides free business development services, resources, and tools. Wherever you are on your entrepreneurial journey, the SBDC can help elevate your business. Visit www.michigansbdc.org or call 810.762.9660 for more information. Check all that apply.					
Applicant has contacted the SBDC for consulting services					
Applicant has received SBDC consulting services in the past					
Applicant still receives SBDC consulting services					
☐ Not applicable					
Application Checklist					
Please ensure the following are submitted with your completed application:					
Business Plan and Financial Projections Project Pro-Forma Cost Estimate(s)					
All existing lien holder agreements (if applicable) Design Renderings Before Photos					
Note: Applicants may be requested to attend the Economic Vitality Committee Meeting at the time of the application review. Other documentation may be requested if deemed necessary by OMS & DDA. Additional information that may be requested are credit reports for all business/owners; proof of requity investment; personal/business tax returns, current business financial statement, cash flow statements, copy of lease/purchase agreement, commitment letters from other lenders/project participants, cost estimates-all items being purchased with Revolving Loan & Grant Program monies, articles of incorporation, partnership, and/or operating agreements. The applicant shall be responsible for a \$500 grant processing fee if awarded. By signing this form, I, the applicant, certify that all information contained above is true and complete to the best of my knowledge and belief. Applicant understands this application and any other information received with it will be retained whether this request is approved or denied.					
Applicant signature: Date signed:					
Owosso Main Street & Downtown Development Authority					
Application received by: Date received:					
Completed grant applications will be reviewed by the OMS & DDA Economic Vitality Committee. If					

Completed grant applications will be reviewed by the OMS & DDA Economic Vitality Committee. If approved, applications will be submitted to the OMS & DDA Board of Directors for approval. Grant applications approved by the OMS & DDA Board will be submitted to Owosso City Council for approval.