



CITY OF OWOSSO, MICHIGAN
APPLICATION – OWOSSO MAIN STREET/DDA (OMS)
REVOLVING LOAN FUND

301 W Main Street, Owosso, MI | 989.277.1705 | beth.kuiper@ci.owosso.mi.us | www.downtownowosso.org

GRANT APPLICATION

\*\*BEFORE COMPLETING/SUBMITTING THIS APPLICATION, PLEASE CONTACT OMS/DDA (CONTACT INFO IS LISTED ABOVE). THE OMS/DDA BUSINESS VITALITY COMMITTEE WILL OFFER FREE ASSISTANCE IN COMPLETION OF THIS APPLICATION AND HELP ANSWER ANY QUESTIONS/CONCERNS ASSOCIATED WITH APPLICATION SUBMISSION.\*\*

APPLICANT INFORMATION:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

BEST PHONE #: \_\_\_\_\_  Business  Mobile  Home

EMAIL: \_\_\_\_\_

PROPERTY INFORMATION:

OWNER ENTITY NAME: \_\_\_\_\_

DBA (if different): \_\_\_\_\_ EIN # (if applicable): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

TYPE/CATEGORY OF PROPERTY: \_\_\_\_\_

TAX CLASSIFICATION OF OWNER ENTITY:

Corporation  LLC  Partnership  Proprietorship  S-Corp  Individual

PROPERTY IS:  Vacant  Occupied - List Tenants: \_\_\_\_\_

FACILITY/BUILDING IS:  Owned  Leased  Rented  Looking for Space  N/A

PROPERTY IS:  Owned by Business  Owned by Applicant  Owned by Other \_\_\_\_\_

SQUARE FOOTAGE CURRENTLY OCCUPIED: \_\_\_\_\_

SQUARE FOOTAGE ACTIVATED AS A RESULT OF PROJECT: \_\_\_\_\_

FINANCIAL INFORMATION:

AMOUNT OF FINANCING ALREADY SECURED FOR PROJECT: \$ \_\_\_\_\_

SOURCE OF FUNDS: \_\_\_\_\_

AMOUNT YOU and/or OTHER OWNERS PLAN TO INVEST: \$ \_\_\_\_\_

LIST OTHER INVESTORS/OWNERS IF APPLICABLE:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

*CONTINUE TO NEXT PAGE*

**GRANT REQUEST INFORMATION:**

GRANT REQUEST (check all boxes that apply)

*Note: Grant Maximum per project/building is \$50,000.00*

- Architecture Services (up to \$1,500 for each residential unit; maximum \$12,000 per project)
- 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 REQUESTED: \$ \_\_\_\_\_

ESTIMATED START DATE: \_\_\_\_\_ ESTIMATED COMPLETION DATE: \_\_\_\_\_

WILL GRANT CREATE NEW RESIDENTIAL UNITS?  No  Yes - #: \_\_\_\_\_

WILL GRANT REDEVELOP EXISTING RESIDENTIAL UNITS?  No  Yes- #: \_\_\_\_\_

WILL THE COMPLETION OF PROJECT BE DETERMINED BY GRANT AWARD?

No  Yes - Please provide proof (via pro-forma)

PROVIDE A BRIEF DESCRIPTION OF DEVELOPMENT:

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**APPLICATION CHECKLIST:**

Please ensure the following are submitted with your application:

- Completed RLF Application Form  Project Pro-Forma  Cost Estimate(s)
- All existing lien holder agreements (if applicable)  Design Renderings

*Note: Applicants are requested to be present at the time of the application's review. Other documentation could be requested if deemed necessary by OMS/DDA. Additional information that could be requested are: Credit Reports for all business/owners; Proof of equity 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 purchases with RLF monies; Articles of incorporation, partnership, and/or operating agreements.*

By signing this form, I, the applicant, certify that all information contained above is true and complete to my best 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/DDA Only:**

Application Received By: \_\_\_\_\_ Date Received: \_\_\_\_\_

*\*\*COMPLETED APPLICATIONS WILL BE REVIEWED BY THE OMS/DDA BUSINESS VITALITY COMMITTEE. IF APPROVED, APPLICATIONS WILL BE SUBMITTED TO THE LOAN REVIEW COMMITTEE FOR FINAL APPROVAL. APPLICANTS WILL BE ASKED TO BE PRESENT DURING THE LOAN REVIEW COMMITTEE'S REVIEW OF THEIR APPLICATION. \*\**