



# MICHIGAN ECONOMIC DEVELOPMENT CORPORATION

## Sign In/Sign Up Instructions

### For New Users:

By clicking **Sign Up**, you will be prompted to enter your email address and create a password. Once you have chosen your password, your account will be created and you will gain access to the portal.

### For Returning Users:

Sign into the portal using the email address and the password you created when you originally signed up for the portal. If you have forgotten your password, click "**Forgot your password?**" and follow the prompts to reset your password.

## Sign In

Email

Password

[Log In](#)

[Forgot your password?](#)

Need an Account?

[Sign Up](#)



Sign-up for a new account

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# MICHIGAN ECONOMIC DEVELOPMENT CORPORATION

[Return to Login](#)

## Sign In/Sign Up Instructions

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## Sign Up

Enter an email address and choose a password to create a new account.

Email

Password

- Must contain at least one lowercase letter
- Must contain at least one uppercase letter
- Must contain one number
- Must be between 8 and 32 characters
- Must not be an email address

Confirm password

Passwords must match

**Sign Up**



Click "sign-up" when all questions above are answered





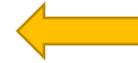
# MICHIGAN ECONOMIC DEVELOPMENT CORPORATION

Match on Main

Welcome, beckmanc1@michigan.org

Please click **"Create a Profile to Get Started"** to begin. You can always edit your Profile by clicking "Edit".  
You cannot move forward until you have completed your Profile.

[Create a Profile to Get Started](#)



Click "Create a Profile to Get Started"

## Profile

Save Draft

Create Profile



**Applicant Entity Name (Legal Name) \***

An organization's legal name is the organization's name as it appears in the certificate of incorporation or the organization's application for charity status, unless a request was subsequently submitted to have the name officially changed. Do not use abbreviations (ex. DDA for Downtown Development Authority).

**Main Street Program Name, if different than Legal Name**

**Applicant Primary Point of Contact (First Name, Last Name) \***

**Point of Contact Email Address \***

**Point of Contact Phone Number \***

**Applicant Authorized Signer (First Name, Middle Name, Last Name) \***

The Authorized Signer is the person within your organization that is able to sign legal documents; This individual does not need to be the same as the Applicant Primary Point of Contact.

**Authorized Signer Email Address \***

**Authorized Signer Phone Number \***

**Applicant Entity Address \***

**Applicant Entity Office Phone Number \***

**Applicant Entity Type \***

Fill in the information for the required questions. Once complete click "Create Profile."



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Match on Main

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Profile Complete [Edit](#)

To begin, click "+Get Started" below. When you return to this Homepage, you can see the status of your submission by the colored status bar below the submission card.

- If the status bar is gray, your submission is under review, and no action needs to be taken.
- If the status bar is blue, there is an action required. Click on the Submission Card to complete.
- If the status bar is red, there is an error. Please reach out to the Administrator of this program.



Once your profile is created, click "Get Started" to begin the Match on Main Application



## Untitled

Order by: Newest to Oldest

### Application Intake

When every step in this submission is complete, the "Submit" button to the right will become green and clickable.

The submission is not fully submitted until you click the green "Submit" button. Once you click "Submit" the submission will no longer be editable.

Submit

### Application

Action Required

Open

If you have not started this section, please click the "Open" button to the right.  
If you have already started this section, please click the "Open" icon to the right to continue.  
If you have completed the section and would like to view, please click the "View" icon to the right.  
Once this step has been completed, it can only be opened in a read-only state.



Click "Open"



## Application ▾

Save Draft **Mark Complete** Close

Please complete all required fields.

You can save as a draft and return later to complete by clicking "Save Draft" at the bottom of the page.

When you are ready to submit this step, please click the blue "Save" button at the bottom of the page.

### Applicant Eligibility

Please answer the following questions to help determine your organization's eligibility for the Match on Main program. Final eligibility and funding determinations are made at the discretion of the MEDC.

**Name of Community that the Applicant is applying on behalf of. \***

City in Michigan

If a community has multiple organizations that could be considered qualified applicants, the organizations should communicate with one another to avoid competing application submissions. Please note that the MEDC will only award grant funds to one qualified applicant under each grant agreement. If multiple applications for the same community are submitted, they must represent different traditional commercial districts within the community. If multiple applications are submitted on behalf of the same district or geographic area, the MEDC reserves the right to deny any or all of the applications.

**In order to qualify for Match on Main funding, an applicant must represent a district that is located within a community that is Certified or Essentials in the Redevelopment Ready Communities Program - OR - an applicant must represent a district that is in the Select or Master Level of the Michigan Main Street Program. \***

- Certified or Essentials in RRC
- Engaged in MMS
- None

[Redevelopment Ready Communities Program](#)  
[Michigan Main Street Program](#)

Complete  
required  
questions.



Please note, the application will automatically "save" for every 5 minutes. You can also click "save draft" and return to your application later.

### Applicant Competitiveness

The questions and attachments in this section will be used to evaluate your application for Match on Main program funding. Please provide concise responses to the following narrative questions and be sure to submit all required attachments.

**Question 1:** How long has your organization been in operation? Describe your organization's history working within the district in which the eligible business is located. How has your organization provided direct support to local businesses within your district? Please provide specific examples. (Examples: technical assistance, small business workshops, funding programs, etc.) \*

**Question 2:** Why did your organization choose the selected business to put forward for the Match on Main program? How does providing support for the selected business help achieve the mission, vision, and/or a strategic priority of your organization? How will the project proposed by the selected business enhance the district where the selected business is located? Please provide detailed examples. \*

**Question 3:** Please describe your organization's capacity to administer the Match on Main program by highlighting past grant management experience (example: façade program). If awarded Match on Main funding, please describe how you will manage the program, including but not limited to, your anticipated method for receipt collection and disbursement of funds. Please also explain your strategy for communication with the selected business and the Michigan Economic Development Corporation to ensure a smooth grant administration process. \*

**Question 4:** Please describe the process and/or scoring approach that your organization used to select the business submitted for the Match on Main program, including any considerations you used to ensure equitable and transparent access to the program. Provide details on communication and outreach to eligible businesses, key decision maker that determined which business was included in the final application, scoring criteria used and why those factors were applied to the selection process. \*

**Optional Attachment:** Upload a blank scoring matrix (or other forms/materials) that your organization used to evaluate and select the businesses included in this application.

+ Select a file 1.png



This is a scrolling application, meaning that as you complete the required questions in each section, more questions will pop-up.

program, including any considerations you used to ensure equitable and transparent access to the program. Provide details on communication and outreach to eligible businesses, key decision makersthat determined which business was included in thefinal application, scoring criteria used and why those factors were applied to the selection process. \*

Test

Optional Attachment: Upload a blank scoring matrix (or other forms/materials) that your organization used to evaluate and select the businesses included in this application.

+ Select a file 1.png

### Business Eligibility

Please answer the following questions to help determine eligibility of the selected business for the Match on Main program. Final eligibility and funding determinations are made at the discretion of the MEDC.

The business is located within the boundaries of the municipality that the applicant serves \*

Yes

The business is located in a traditional downtown, historic neighborhood commercial district, or area planned and zoned for concentrated commercial development \*

Yes

The business sells products and/or services face to face AND has a physical location within a traditional downtown, historic neighborhood commercial corridor, or area planned and zoned for concentrated commercial development (Ex. The business has a storefront location downtown) \*

Yes

The business will have, or intends to have, control over the site for which they are applying prior to Match on Main application. Changes in the proposed business location may result after grant selection may result in grant being forfeited \*

Yes

The business is operating as a for-profit or non-profit \*

Yes

The business is headquartered in Michigan \*

Yes

The business has not received or been approved to receive support from a previous round of the Match on Main program \*

Yes

Save Draft Mark Complete Close



**Total Project Cost (Total A) \***

A minimum of 10% match is required. This number will be found in the Local Business Worksheet (Appendix C) submitted by the business.

**Match on Main Grant Request (Total D) \***

Maximum grant request is \$25,000. This number will be found in the Local Business Worksheet (Appendix C) submitted by the business.

**Total Project Private Investment (Total E) \***

Total E will be found in the Local Business Worksheet (Appendix C) submitted by the business.

Private investment includes any non-Match on Main funds that will be leveraged to implement the project proposed in this application within 6-months of an executed Match on Main grant agreement. All costs associated with the proposed project should be reflected in the required third-party cost estimates. Please note that a minimum 10% match is required for participation in this program. The totals included above can be found in the Local Business Worksheet (Appendix C) submitted by the business.

**Total square footage of business \***

**Total square footage being activated, renovated or improved as a result of this project \***

**Does the business rent or own its space? \***

**How many full-time employees does the business currently have? (If a sole proprietor, please say "1") \***

**How many new full time jobs are going to be created by the business as part of this project? \***

**How many new part time jobs are going to be created by the business as part of this project? \***

Save Draft

Mark Complete

Close

## Business Competitiveness

The questions and attachments in this section will be used to evaluate your application for Match on Main program funding. Please provide concise responses to the following narrative questions and be sure to submit all required attachments. Many of these questions pertain to the selected business and may have been answered on the Local Business Worksheet.

**Question 1: Please describe the scope of the project, including specific activities or expenses, that the selected business is seeking to fund through the Match on Main program. Explain how the project scope aligns with the budget and cost estimates provided by the business. Additionally, describe why the Match on Main funds are needed in order for this project to come to fruition. \***

Local Business Worksheet \*

+ Select a file

Cost Estimates from a Third-Party \*

+ Select a file

How would you like to upload Before Photos of the Project? \*

- Single combined PDF  
 Individual image uploads

**Question 2: Is the selected business meeting the required minimum cash match of 10% of the Match on Main grant request? Has the selected business undertaken (or is the selected business anticipated to undertake) any additional private investment? \***

**Question 3: 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 analysis of the investment, consultation with local small business resource providers, market data, or national trends/ best practices. Why did the business owner pursue or not pursue these avenues of technical assistance, business resources, financial resources, etc.? \***

**Question 4: How is the project proposed by the selected business anticipated to result in business growth? Please provide specific examples. How is the project proposed by the select business anticipated to result in increased operational efficiencies and/or activation of underutilized or vacant space? Please provide specific examples. \***

**Question 4:** How is the project proposed by the selected business anticipated to result in business growth? Please provide specific examples. How is the project proposed by the select business anticipated to result in increased operational efficiencies and/or activation of underutilized or vacant space? Please provide specific examples. \*

**Question 5:** How is execution of this project anticipated to result in the creation and/or retention of jobs within your business? Please include at least the following information: number of jobs that will be retained and/or created (including owner/operator, if applicable), the type of jobs that will be retained and/or created, and whether the job(s) retained and/or created will be full or part time positions. Note that Match on Main is not evaluating projects based on the number of jobs created or retained, but simply would like to understand how projects will impact job creation and/or retention. \*

**Question 6:** Recognizing that Match on Main is a grant reimbursement program, how do you intend to cover the costs associated with your project prior to receiving reimbursement from the Michigan Economic Development Corporation? In your response, please be sure to include the total cost of the project, what sources of funds will be used to pay for all elements of the project PRIOR to Match on Main reimbursement, the amount of each funding source planned to be used and when funds will be available for each identified source. \*

**Question 7:** What is the timeline for starting and completing all project activities? Per the Match on Main Program Guide, projects must not begin prior to submitting a formal application for Match on Main funding and, if awarded, all projects must be completed within 6 months of grant execution. \*

Last saved at 9:22:39 AM

Save Draft

Mark Complete

Close

## Application Certification

Please complete the questions below to certify your application for final submission. Submitted applications will be reviewed for completeness and eligibility; any incomplete or ineligible applications will be notified that they are not eligible to move forward in the scoring process. Eligible and complete applications will be scored to determine how funding will be awarded and applicants will be notified of their funding status as soon as possible. Final eligibility and funding determinations are made at the discretion of the MEDC.

**Certification of Complete Application: I have completed all narrative questions; I have uploaded all required attachments and any option attachments I wish to provide; I certify that the business included in this application has reported that they meet all business eligibility criteria \***

I Agree

**If awarded funds, I certify that the organization I am applying on behalf of will comply with all MEDC requirements, including but not limited to, marketing, promotions, reporting and compliance. Terms and conditions related to these requirements will be defined in the final grant agreement. \***

Yes

No

*Last saved at 9:22:39 AM*

Save Draft

Mark Complete

Close



Once you believe you have completed the narrative questions and included the required attachments, mark your application as “complete.”



### Chelsea's Chocolates

Order by: Newest to Oldest

**Application Intake** Submit

When every step in this submission is complete, the "Submit" button to the right will become green and clickable.

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---

**Application** Complete Edit

If you have not started this section, please click the "Open" button to the right.  
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Once this step has been completed, it can only be opened in a read-only state.

CLICK HERE TO SUBMIT YOUR APPLICATION

Your application is now listed as "complete." You may go back and edit a "complete application." PLEASE NOTE – to officially "submit" your application, you must hit the green "SUBMIT" button.



### Chelsea's Chocolates

Order by: Newest to Oldest

**Application Intake** This has been submitted.

Thank you for submitting.  
Your submission is now under review and you will be contacted if any additional information is needed.

---

**Application** View

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**THIS BUTTON  
WILL APPEAR  
WHEN AN  
APPLICATION IS  
SUBMITTED**



Click here to  
get back to  
the Match on  
Main portal.



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Add Another

Chelsea's Chocolates

Created on 09/18/2021

Application Submitted

Click here to submit another application.