**RUSSELL MAIN STREET INCENTIVES WITHOUT WALLS PROGRAM**

Russell, Kansas

**FY2016 Application**

Administered by:

Russell Main Street, Inc. PO Box 58

507 N Main Russell, KS 67665 [www.russellmainstreet.com](http://www.russellmainstreet.com/) mainstreet@eaglecom.net

***Incentives Without Walls***

**FY 2016 APPLICATION**

|  |  |  |
| --- | --- | --- |
| **1.** | **Main Street Organization**Organization Name: |  |
|  | Main Street Manager: |  |  |  |  |  |  |  |
|  | FEIN: |  |  |  |  |  |  |  |
|  | Address: |  |  |  |  |  |  |  |
|  | City: |  | County: |  |  |  | Zip: |  |
|  | Telephone: |  |  |  | Fax: |  |  |  |
| **2.** | **Applicant Information**Business Name: |  |  |  | **Project Information**Name of Project: |  |  |
|  | Name: |  |  |  | Address of Project: |  |  |
|  | Title: |  |  |  |  |  |  |
|  | Address: |  |  |  |  |  |  |
|  | City: |  |  |  |  |  |  |
|  | State: | Zip: |  |  |  |  |  |
|  | Social Security #: |  |  |  |  |  |  |

**3. Type of Project (check one)**

Major Project ($1,500-$20,000 see guidelines for specific information)

Small Project Loan ($500-$2,000 see guidelines for specific information)

**4. Amount Requested**

Amount of funds requested by local Main Street program for this project. $

This money will be distributed locally as a: (check one)

Direct grant to the business – must meet criteria for a grant

No-interest loan

What is the ratio of the grant to private investment?

If a loan, list the date for final repayment and the interest rate (term may not exceed seven years).

Current IWW Revolving Loan Fund balance $

**5. Project Narrative**

Use the space below to describe the entire scope of the project and justify how it meets at least

one of the two categories for eligibility. Be sure to address these areas:

Project description: Provide an overall description of the project. What is the scope?

Magnitude of the need: Present your case for funding. What is the need for this project to be completed?

The project proposed impacts (solves) the problem: What impact will this project have not only on this building/business, but on your district?

The project proposed has long-term impact on the downtown district: How will it improve your district’s economic health and vitality? Will it provide a viable business base?

Has potential to have long-term impact on the tax base: How will this project impact your tax base?

Relationship to and consistency with current downtown plan: Relate this project and its potential impact to your downtown plan.

Job creation or retention: Will this project create new jobs or retain current? If so, how and how many. Do not include jobs created by construction or renovation work.

Creates or retains viable business: Will the project result in a maintainable business in your downtown district?

**6. Budget**

Include the proposed line item expenses for the project showing the amount of investment and the

amount of IWW funds applied to the specific expenses. Budget should be broken down to include each expense by line item. (Be sure to include local program administrative cost if applicable.)

**Expense Private Funds IWW Funds Total Per Expense**

|  |  |  |  |
| --- | --- | --- | --- |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
|  | $ | $ | $ |
| **TOTAL AMOUNT OF FUNDS** | $ | $ | $ |

**7. Project Schedule**

Outline the proposed time schedule for the project (be specific). Keep in mind that the project

must begin within 90 days (30 days for an open round project) after funds are awarded, and it must be completed within one calendar year of the award.

**8. Resolution**

This resolution of support must be approved by the Main Street Board of Directors and signed by

the Board Chair.

**A Resolution Endorsing the Application for FY2016 IWW Funds**

**WHEREAS**, the has been created to work to revitalize

(Name of Local Program)

the downtown business district; and

**WHEREAS**, the Board of Directors of agree to specifically

(Name of Local Program)

utilize FY2016 IWW funds in the manner outlined in this application and consistent with the program guidelines.

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF DIRECTORS OF**

 **MAIN STREET PROGRAM**, that we do hereby support the formal

request for FY2016 IWW funds.

Passed and approved this day of , 2016

SIGNED: ATTEST:

Main Street Board Chair Main Street Board Secretary

Date Date

**9. Attachments/Checklist**

The following attachments must be included with this application:

Architectural drawings showing proposed changes (if part of this project involves design)

Current photograph of project site (if part of this project involves design)

Footprint map of designated district with location of application project highlighted

Business plan (if this project will assist an existing or new business)

Market analysis or strategic plan (if this project is part of an overall plan for downtown revitalization).

Letter of support from the mayor or city manager of your community. This letter must demonstrate an awareness of the project on behalf of the city and represents the support of city government.

Photocopies of bids/estimates used to determine budget

Original application and attachments plus one complete photocopy.