



**2024 Application**

This program is intended to assist in financing high-quality improvements that will improve the appearance and character of downtown Marshfield. **We encourage you to start this process early to ensure ample time for contractor estimates.**

Project (Building) Address	
Applicant Name	
Applicant Mailing Address	
Applicant Email Address	
Home Phone	Work Phone
Co-Applicant Name	
Co-Applicant Mailing Address	
Co-Applicant Email Address	
Home Phone	Work Phone

Property Owner Name(s)	
Owner Mailing Address	
Owner Email Address	
Home Phone	Work Phone

Describe work to be undertaken (Please attach itemized contractor estimates)
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Describe the positive impact your project will bring to Marshfield
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Total Cost	Cost of Eligible Improvements
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Amount of Matching Grant Assistance Requested (May not exceed 50% of eligible costs; \$40,000 cap)
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Estimated Date of Project Completion
If your project exceeds your estimated cost, do you have the working capital to complete the project in its entirety?
List all land uses on the subject property

**Application Eligibility**

**In order to be eligible to apply for this program, the following four items must be true:**

1. The property in question must be in TIF District 4;
2. Tenant and property owner must be current on all real estate and personal property taxes
3. Tenant and property owner must not owe any amount of money to the City of Marshfield; and
4. Project may not be for routine repairs or maintenance

**Required Material to Accompany Application**

**The following items need to accompany your application in order to be considered for matching grant assistance funding:**

- A signed letter of consent from the property owner(s) if the applicant is not the owner of the property
- At least two itemized bids/estimates detailing the cost of the work to be done. Applicants are required to use local (within the city limits of Marshfield) contractors and products for their project whenever possible to support the local economy.
  - A local contractor does not need to be used if\*:
    - The local contractor’s cost is 25% higher than an outside contractor
    - Local contractor does not provide an estimate prior to the application deadline
    - A local contractor for the required work does not exist
- Drawings detailing all of the work to be completed as part of the project
- Description or sample of project materials and colors
- Proof of insurance from the tenant or property owner

\*Evidence must be provided to qualify for this exception in the form of the estimates, email screenshots, or photos.

**The applicant must obtain all necessary permits and approvals prior to commencing any work. All required inspections must be completed and approved by the required officials. All submitted documents are property of the City of Marshfield. In the event of limited funding, the Committee reserves the right to prioritize certain work projects. The Committee may also grant a partial amount of the funding requested.**

Your signature below indicates you or your business's intent to apply for matching grant assistance funding and that you have read and understand the program overview. The program description can be found on the City's website. Your signature also certifies that the information contained within, and attached to this application is correct and accurate to the best of your knowledge.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Applications should be emailed or mailed to Main Street Marshfield:**

Executive Director Kaelie Gomez  
[executivedirector@mainstreetmarshfield.com](mailto:executivedirector@mainstreetmarshfield.com)

Main Street Marshfield  
% Downtown Building Revitalization Program  
211 South Central Ave, Suite A  
Marshfield, WI 54449

