AFFILIATED | MAIN STREET APPLICATION

DUE: JANUARY 15, 2027

The Affiliated Main Street level is for communities who are either just starting to form, or are working on strengthening, their Main Street structure to harness the powerful main street methodology to create lasting impact in enhancing their historic downtown or traditional commercial neighborhood.

Qualifying as an Affiliated Main Street

- ❑ Have an identifiable Main Street District in a traditional downtown or neighborhood commercial district.
- ❑ Operate an independent nonprofit with appropriate staffing within two years of acceptance
- ❑ Complete annual activities supporting the Main Street Four-Point Approach™

Applicant organizations agree to the following maintenance objectives:

❑ Maintain a comprehensive revitalization strategy that follows the Four-Point Approach™
❑ Focus on a pedestrian-oriented traditional commercial core defined by boundary map
❑ Operate an independent nonprofit which holds an office in the designated district within two years
❑ Have an active volunteer board of directors
❑ Develop a staffing plan within three years
❑ Develop an adequate long-term funding strategy within three years
❑ Adopt a statement of commitment to being an inclusive organization that welcomes all
❑ Include Oregon Main Street staff in executive director hiring processes
❑ Director attends all required conferences and trainings (Oregon Main Street Network, Oregon Main Street Conference, New ED Orientation, occasional workshops on request)
❑ Send all board members to Oregon Main Street virtual Board Member Institute and at least one volunteer board member to the Oregon Main Street Conference
❑ Maintain a historic preservation ethic
❑ Become members of and maintain membership in the National Main Street Network
❑ Use Main Street America™ brand appropriately and follow brand standards

Application Instructions

- Type directly into the application form unless an attachment is requested.
- For questions requiring narratives a maximum length is set, do not exceed this length.
- All questions must be answered.
- Applications and attachments should be in a common format such as PDFs, JPGs, TIFs, PNGs, .docx (word), .xlsx (excel), etc.

- Name all attachment files according to the attachment number and basic description. (e.g. Attachment 1 – City Council Resolution)
- Where possible, place the appropriate attachment number in the top righthand corner within each attachment document in addition to appropriate file names.
- Do not include items that have not been specifically requested.
- Do not fax or mail your application.

Strong Applications

Strong applications will be evaluated for their ability to do the following:

▪ Illustrate strong commitment from local government and private sector organizations in supporting revitalization efforts following the Main Street Approach®
▪ Highlight historically significant and unique buildings in the district and exhibit community historic preservation ethic
▪ Demonstrate the need for district revitalization/preservation and how the district will benefit from Oregon Main Street technical assistance
▪ Demonstrate the readiness and willingness of the community and organization to proceed with revitalization, commit time and resources, and explore new ventures
▪ Employ or plan to employ an executive director at a minimum of 20 hours per week
▪ Display a past record of community development efforts and broad community support
▪ Expresses likelihood of impactful change for commercial district as a result of participation
▪ Present an honest picture of your community and organization, featuring strengths and weaknesses, using data and prior documentation where possible
▪ Follow application instructions
▪ Use clear and concise language, avoiding excessive narrative

We recommend applicants proactively collect letters of support along with your city council resolution as soon as you decide to apply.

Application Submission

Completed Main Street applications must be received by January 15, 2027.

Please upload a zip file of the of the completed application with attachments at: Affiliated Main Street Application Uploads

Instructions for creating a zip file and uploading to the OMS shared drive can be found at the How to Join link on our website. For assistance or questions regarding application submission, please contact Cam Amabile at 971-720-8998 or cam.amabile@oprd.oregon.gov.

All other questions about this application may be directed to Ami Keiffer at 503.551.3705 or ami.keiffer@oprd.oregon.gov.

OREGON MAIN STREET
AFFILIATED MAIN STREET APPLICATION

GENERAL INFORMATION:

City or Town:	County:
City population:	County population:
State Legislative District - House:	Congressional District – House:
State Legislative District – Senate:	Congressional District – Senate:
Size of proposed downtown district in square blocks:	

Organizational Contact Information:

Applicant Name & Position		**Organization (if applicable)**	
Executive Director Name (if applicable)		**Organization Address**	
Daytime Phone		**Organization Website**	
Email Address		**Organization Tax Identification Number**	
Fax Number		**Organization IRS Status (501c3, 501c6)**	
		Organization Incorporation Date	

SECTION A: DOWNTOWN DISTRICT INFORMATION

Please answer the following questions about your proposed downtown district.

District by the Numbers	
Approximate number of buildings in district	
Approximate number of businesses in district	

1. Briefly describe the economic and physical characteristics of your downtown district.

2. Briefly describe any efforts to improve the downtown or historic commercial district over the past 5 years.

3. How supportive is the community of the downtown? Include examples touching on residents, businesses, property owners, and local government.

SECTION B: YOUR ORGANIZATION

4. Briefly describe the structure of your organization or host entity. How will the Main Street Four Point Approach® be implemented throughout this structure?

5. Please describe your board development plan. This may include how you identify gaps in skills or perspectives, your nomination process, new member orientation, and leadership succession strategies.

6. How does your board membership reflect the diversity of your community and represent downtown stakeholders?

7. What do you hope to achieve by participating as an Affiliated Main Street level community?

8. Describe what steps your community has taken to learn about the Main Street Approach, such as attending conferences, reading informational materials, holding community meetings, etc.

9. Write your organization's mission and vision statement. Indicate when it was developed and by whom. If you don't have a mission and/or vision statement leave the appropriate space(s) blank.

Mission	
Vision	

SECTION C: ATTACHMENTS

Attachment Series:

Attachment #	Attachment Description	
1	A map of the primary focus areas of your downtown revitalization effort	☐
2	A letter or resolution from city council endorsing the revitalization effort and expressing future support	☐
3	A copy of the IRS nonprofit status determination letter	☐
4	A copy of your organization's most recent bylaws	☐
5	Minimum of 10 current photographs that illustrate your downtown district such as historic buildings, downtown events, aerial/context images, etc.	☐
6	If applicable, an organizational workplan	☐
7	A list of your current board and committee members	☐

Organizational Agreement

We agree to meet the requirements of Oregon Main Street as outlined above and will be eligible to receive Affiliated Main Street level services from Oregon Main Street if the requirements are met. We recognize that the Affiliated Main Street level of the Oregon Main Street Network is also eligible for Main Street America™ (MSA) recognition as an Affiliate member pending signing of a MSA sub-license agreement with Oregon Main Street in addition to other criteria established by MSA.

The state program requires that brief quarterly reports be submitted. Information requested in the report includes statistics on jobs, businesses, building renovation and construction costs, public improvement projects, etc. Submission of this application indicates your agreement to the quarterly reporting requirements and that you will adhere to deadlines for submitting these reports.

Please check the appropriate box to indicate organizational agreement to this responsibility.

Yes, we agree. ☐ No, we do not agree to this. ☐

_____ _____

Signature of Designated Contact Person Date