

**Miami-Dade Empowerment Zone
Neighborhood Assembly Membership Application
(RESIDENTIAL)**

The Office of Community and Economic Development (OCED), is soliciting members for the Empowerment Zone (EZ) Neighborhood Assemblies. The primary purpose of the Miami-Dade EZ Neighborhood Assemblies is to advise the Empowerment Zone Advisory Board (EZAB) with regards to the implementation of the Strategic Plan and recommend, when appropriate, amendments and revisions to the Strategic Plan as well as specific neighborhood projects. *If you are interested in serving on the Neighborhood Assembly, you MUST meet the criteria listed in Section and complete the application below. In addition, a one page (maximum) narrative explaining your interest in serving on the Assembly is requested. Applications MUST include proof of residency (recent utility bill or voter's registration card).*

Applications should be delivered or mailed to: OCED, 701 NW 1st Court, 14th Floor, Miami, FL 33136. Attention: Lori Weldon. **FAXED APPLICATIONS WILL NOT BE ACCEPTED.** Incomplete applications will be disqualified. To determine your EZ targeted geographical area, go to www.miamidade.gov. For additional information please contact Lori Weldon at loriw@miamidade.gov.

SECTION A: PERSONAL IDENTIFYING INFORMATION

NAME _____

ADDRESS _____

CITY _____

STATE _____

ZIP CODE _____

TELEPHONE (DAYTIME) _____

TELEPHONE (EVENING) _____

FAX NUMBER _____

SECTION B: TARGETED GEOGRAPHICAL AREA (Check one)

Allapattah/Civic Center

Homestead

Melrose

Overtown

Florida City

Little Havana

Liberty City/Model City

Wynwood

Number of years residing in neighborhood: _____

SECTION C: MEMBERSHIP QUALIFICATION

To qualify the individual must have maintained their primary residence in the respective EZ neighborhood for a minimum of one (1) year.

Individuals must be selected to represent the EZ Neighborhood through a neighborhood election process.

SECTION D: VERIFICATION OF RESIDENCE: FOR OFFICIAL USE ONLY

Recent Utility Bill Provided _____

Name Shown on Bill _____

Address Shown on Bill _____

Date of Bill _____

Voter's Registration Number _____

