

**Miami-Dade County Commissioner
Sally A. Heyman, District 4**

Announces

**Mom and Pop Small Business
Grant Program**

(Application for financial assistance through Miami-Dade County)

Applications accepted:

January 13, 2014 through February 7, 2014

**Return original completed applications
no later than 12 noon February 7th to:**

**Commissioner Sally A. Heyman, District 4
1100 NE 163rd Street, #303
North Miami Beach, FL 33162**

Phone: 305-787-5999

****Faxed copies of completed application will not be accepted****

MOM AND POP SMALL BUSINESS GRANT PROGRAM

BRIEF DESCRIPTION

The Mom and Pop Small Business Grant Program was created to provide financial and technical assistance to qualified small businesses that are approved for funding. This program has allowed small owned and operated businesses the opportunity to interact with local government under favorable conditions ultimately bridging the gap between the two entities.

- The program provides financial assistance to further the economic viability of recipients.

Eligible uses of funding:

Inventory/Supplies	Minor Interior/Exterior Renovations
Business Equipment	Security System
Marketing/Advertising	Commercial Liability Insurance
Professional Services	
Work Vehicle (must be purchased and registered under business name)	

Ineligible uses of funding:

Rent/Lease or Mortgage	Local or State Licenses
Rental Deposits	Taxes
Late Payment Fees	Purchase of Alcohol, Tobacco or Medicine
Salaries	Utility Bills

- Technical assistance is made available to small businesses in order to create a better working and business environment, promote economic development opportunities, educate owners about various county-funded programs and projects.

The program is offered countywide. **This grant package is *only* for District 4.** Deadlines and application forms for each district may differ. Therefore, please be sure to pick up the appropriate application.

Miami-Dade County Commissioner Sally A. Heyman Mom & Pop Small Business Grant Program Guidelines

Miami-Dade County Commissioner Sally A. Heyman is offering Mom & Pop Small Business Grant applications to qualified businesses located in District 4. All businesses **must** meet the following criteria in order to qualify:

1. In business for at least 2 year(s) (include proof – i.e. Sunbiz.org printout).
2. A **photocopy** of State of Florida Business License (Issued by Florida Department of Business and Professional Regulation)
3. Cannot have more than seven (7) full-time employees.
4. Cannot be a part of a national chain.
5. Have no more than two (2) businesses.
6. Submit **photocopies** for the current year **and** past **TWO** fiscal years of Miami-Dade County Business Tax License (SEE SAMPLE) and Municipality license if located in a Municipality at the time of application. Business name on application must match one on license.
7. A physical address is required. P.O. Box as a mailing address is NOT allowed.
8. Applicant must apply in district where business is located.
9. Home-based businesses can apply.
10. Only one application per business.
11. Non-profit agencies cannot apply.
12. Businesses that relocate out of the district during the application, award and payment processing of the grant will be disqualified.
13. Business or owner must not have a delinquent loan with Miami-Dade County or a County funded department or agency.
14. **Businesses that received funding in the past cannot apply.**
15. Application must be typed or printed only. If application is illegible, it will automatically be disqualified.
16. Applicants must sign and submit all requested documents. Incomplete applications will not be considered and will automatically be disqualified.
17. **Must provide picture of business location (building, office, or work vehicle).**
18. Applications will not be accepted after deadline.

Deadline: 12 noon, Friday, February 7, 2014 NO EXCEPTIONS.

Mandatory Workshops for Approved Recipients

Guidelines for the Mom and Pop Small Business Grant Program require that each approved recipient attend a mandatory business training workshop.

It is very important that you attend the entire two-hour workshop and complete the required package at that time. Otherwise, you may be disqualified from the program.

Approved businesses selected by the grant committee for a Mom and Pop Small Business grant will receive the date, time and location of the workshop.

The date, time and location of the workshop will be finalized at a later date. Approved grant recipients will be contacted with the workshop information via USPS mail.

MIAMI-DADE COUNTY
TAX COLLECTOR
140 W. FLAGLER ST.
1st FLOOR
MIAMI, FL 33130

2010 LOCAL BUSINESS TAX RECEIPT 2011
MIAMI-DADE COUNTY - STATE OF FLORIDA
EXPIRES SEPT. 30, 2011
MUST BE DISPLAYED AT PLACE OF BUSINESS
PURSUANT TO COUNTY CODE CHAPTER 8A - ART. 9 & 10

FIRST-CLASS
U.S. POSTAGE
PAID
MIAMI, FL
PERMIT NO. 231

THIS IS NOT A BILL - DO NOT PAY

BUSINESS NAME / LOCATION

RENEWAL

RECEIPT NO.

33155 UNIN DADE COUNTY

OWNER

Sec. Type of Business

196 SPEC ELECTRICAL CONTRACTOR

WORKER/S

6

THIS IS ONLY A LOCAL
BUSINESS TAX RECEIPT. IT
DOES NOT PERMIT THE
HOLDER TO VIOLATE ANY
EXISTING REGULATORY OR
ZONING LAWS OF THE
COUNTY OR CITIES. NOR
DOES IT EXEMPT THE
HOLDER FROM ANY OTHER
PERMIT OR LICENSE
REQUIRED BY LAW. THIS IS
NOT A CERTIFICATION OF
THE HOLDER'S QUALIFICA-
TIONS.

DO NOT FORWARD

PAYMENT RECEIVED
MIAMI-DADE COUNTY TAX
COLLECTOR:

07/23/2010
02230011001
000075.00

59

SEE OTHER SIDE

Local Business Tax Receipt

Miami-Dade County, State of Florida

-THIS IS NOT A BILL - DO NOT PAY

LBT

7162457

BUSINESS NAME/LOCATION
MOM AND POP SAMPLE LBT
ONLY
140 W. FLAGLER ST 1407
MIAMI, FL 33130

RECEIPT NO.
NEW BUSINESS
7440473

EXPIRES
SEPTEMBER 30, 2014
Must be displayed at place of business
Pursuant to County Code
Chapter 8A - Art. 9 & 10

OWNER
MOM AND POP SAMPLE LBT ONLY

SEC. TYPE OF BUSINESS
214 RETAIL SALES

**PAYMENT RECEIVED
BY TAX COLLECTOR**
0.00 12/10/2013
FPPU15-14-001663

Employee(s) 0

This Local Business Tax Receipt only confirms payment of the Local Business Tax. The Receipt is not a license, permit, or a certification of the holder's qualifications, to do business. Holder must comply with any governmental or nongovernmental regulatory laws and requirements which apply to the business.

The RECEIPT NO. above must be displayed on all commercial vehicles - Miami-Dade Code Sec 8a-276.

For more information, visit www.miamidade.gov/taxcollector

MIAMI-DADE
COUNTY

Here are samples of what your Miami-Dade County Local Business Tax Receipt may look like. The first sample is for fiscal year 2010 - 2011 and the second for 2013-14.

**They are issued based on the fiscal year, each year is a different color.

**You must provide copies of your Local Business Tax Receipt for 2011 - 2012, 2012 - 2013 AND 2013 - 2014.

** WITHOUT THESE COPIES YOUR APPLICATION IS INCOMPLETE **

Business owners are required to provide the following information:

1. How long have you been in business? Number of years _____
2. Have you ever applied for the Mom and Pop Grant before: Yes _____ No _____
3. Have you received a Mom and Pop Grant in the past? Yes _____ No _____
4. If yes, how much funding did you receive? \$ _____
5. Copies of my Miami-Dade County Business Tax License (FY 2011-2012, 2012-2013 and 2013-2014) are attached to the application. (SEE SAMPLE)
Yes _____ No _____
6. Copies of my Municipality Business Tax License FY 2011-2012, 2012-2013 and 2013-2014) are attached to the application.
Yes _____ No _____
7. **Photographs of the inside and outside of business are attached.**
Yes _____ No _____
8. Are you or any of the shareholders employed by Miami-Dade County?
Yes _____ No _____
9. If yes, what department? _____
10. Have you ever applied for a loan? Yes _____ No _____
11. If yes, with whom? _____
12. Was the loan approved? Yes _____ No _____
13. Do you have a past due loan with the County or any County funded department or agency?
Yes _____ No _____
14. If yes, with whom? _____
15. Will you be contributing any funding to the project? Yes _____ No _____
16. If yes, how much? \$ _____
17. Do you own the building that you occupy? Yes _____ No _____
18. Are you willing to participate in Business Development workshops?
Yes _____ No _____
18. Do you currently market your business? Yes _____ No _____
19. If yes, how do you market, please explain (ex: newspaper ads, internet, coupons)

23. Please provide the following information regarding your current employee(s). Owner must be included

Name	Home Address	City - Zip Code	White/Black Hispanic/Other	Male/Female
			W B H O	M/F
			W B H O	M/F
			W B H O	M/F
			W B H O	M/F
			W B H O	M/F
			W B H O	M/F
			W B H O	M/F

My signature below indicates that I have read this document and fully understand its contents.

The information submitted on this document is true to the best of my knowledge.

Signature

Date

*****Application will be considered incomplete unless a copy of County and City Occupational license are attached for all years required.*****