

**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)

Original applications accepted:

**February 4, 2019 through
12 noon, February 22, 2019, to:**

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

Phone: 305-787-5999

Scanned and 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. 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 two year(s) (include proof – i.e. Sunbiz.org printout).
2. Businesses that have received this grant three or more times are NOT eligible for grant dollars.
3. A **photocopy** of State of Florida Business License (Issued by Florida Department of Business and Professional Regulation).
4. Cannot have more than seven (7) full-time employees.
5. Cannot be a part of a national chain.
6. Have no more than two (2) businesses.
7. 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.
8. A physical address is required. P.O. Box as a mailing address is NOT allowed.
9. Applicant must apply in district where business is located.
10. Home-based businesses can apply.
11. Only one application per business.
12. Non-profit agencies cannot apply.
13. Businesses that relocate out of the district during the application, award and payment processing of the grant will be disqualified.
14. Business or owner must not have a delinquent loan with Miami-Dade County or a County funded department or agency.
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 22, 2019 NO EXCEPTIONS.

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: [REDACTED] RENEWAL RECEIPT NO. [REDACTED]

33155 UNIN DADE COUNTY

OWNER: [REDACTED]

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 QUALIFICATIONS.

DO NOT FORWARD

PAYMENT RECEIVED
MIAMI-DADE COUNTY TAX COLLECTOR
07/23/2010
02230011001
000075.00

SEE OTHER SIDE

59

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
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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
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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



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 2016 - 2017, 2017 - 2018 and 2018 - 2019.

**** WITHOUT THESE COPIES YOUR APPLICATION IS INCOMPLETE ****

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.

DISTRICT 4

Mom and Pop Small Business Grant Program

Miami-Dade County

APPLICATION

(Please print or type – illegible and incomplete applications will not be considered)

I. Business Information

Business Name (as it appears on License) _____

Owner(s) Name _____

Business Address (as it appears on License) _____

Owner's Home Address _____ City _____ Zip Code _____

Business Phone _____ Business Fax _____ Cell Phone _____

Email address _____

Type of Business You Operate _____ \$ _____
 Amount of funding requested

II. Program Usage

I would like to be considered for financial assistance to address the following need(s):

<u>USAGE</u>	<u>DESCRIPTION</u>	<u>ESTIMATES</u>
<input type="checkbox"/> Inventory / Supplies	_____	\$ _____
<input type="checkbox"/> Business Equipment	_____	\$ _____
<input type="checkbox"/> Marketing / Advertising	_____	\$ _____
<input type="checkbox"/> Commercial Liability Insurance	_____	\$ _____
<input type="checkbox"/> Minor Renovations	_____	\$ _____
<input type="checkbox"/> Security System	_____	\$ _____

*****applicants MUST fill in the blanks –
 if area is incomplete, applications will not be considered****

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 2016-2017, 2017-2018 and 2018-2019) are attached to the application. (SEE SAMPLE)
Yes ____ No ____
6. Copies of my Municipality Business Tax License (FY 2016-2017, 2017-2018 and 2018-2019) 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 ____
19. Do you currently market your business? Yes ____ No ____
20. If yes, how do you market, please explain (ex: newspaper ads, internet, coupons)

24. 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.