

# DISTRICT 5 RETAIL RELIEF PROGRAM

Phase II

Apply for a \$1,000 grant to use towards the rent or mortgage of your commercial space



305-375-5924



SmallBusinessD5@miamidade.gov

# Commissioner Eileen Higgins District 5

#### **ABOUT THE PROGRAM**

The COVID-19 pandemic has affected our community in ways we had never experienced before. From our children's education moving to remote learning, to the implementation of social distancing rules, we are all doing our part to flatten the curve and protect our loved ones.

As a result, a majority of small businesses found themselves in the position to shut down their operations. Retail businesses deemed "nonessential" were obligated to close following emergency orders from local and state governments and restaurants had to rely on delivery and takeout, therefore losing a majority of their business and in many cases having to close completely.

As businesses reopen across our District, we aim to support them and ease their transition into our New Normal. For this reason, we have expanded the eligibility requirements for Phase II of this program to include nonessential retail businesses and restaurants

Upon hosting multiple Small Business webinars in partnership with the Small Business Administration, the Small Business Development Center at FIU, and Prospera, Commissioner Higgins heard from small business owners who did not qualify for Municipal, State, or Federal aid.

In response, Commissioner Higgins launched the District 5 Retail Relief Program in place of the 2020 Mom and Pop Program. After a successful Phase I, we are launching Phase II of the District 5 Retail Relief **Program** for nonessential retail businesses and restaurants in our District. The goal of this program is to provide \$1,000 grants to be used only for rent or mortgage payments of commercial spaces. Business owners must provide proof of rent or mortgage payment in order to receive the \$1,000 grant as a reimbursement.

The *District 5 Retail Relief Program* aims to help decrease the business owners' expenses and ensure they can focus any other funds towards payroll, staffing, and other re-opening costs.

District 5 understands that all businesses, essential and nonessential, have been impacted by COVID-19.

#### Submission details

- Applications will be accepted from Friday, June 5, 2020 through Friday, June 12 at 5:00pm.
- All applications **must** be submitted via email to **SmallBusinessD5@MiamiDade.gov**. Paper applications that are mailed or dropped off at the office **will not be accepted.**
- Late or incomplete applications will not be accepted.
- District 5 has the right to stop accepting applications before the final deadline if quota of eligible applications has been exceeded.
- All applicants will be notified via email of the results of the District 5 Retail Relief Program within 10 business days of submission.



## **ELIGIBILITY GUIDELINES**

### To be eligible for this grant, businesses must:

- Be located within District 5 verify that your business is located in District 5 here
- Be one of the following types of businesses:
  - o Have been deemed *nonessential* by Miami-Dade County Mayor Carlos Gimenez's emergency orders issued on March 19, 2020 (find emergency orders here): Art supply stores, craft supply stores, barbers, beauty salons, nail salons, bookstores, clothing boutiques, jewelry stores, music supply stores, souvenir stores, spas, sporting goods stores, tutoring centers, performance arts studios, toy stores and children's stores.
  - Be a restaurant located in District 5
- Have between 2-10 employees, including the owner as of the date of closure
- Have been in operation for at least 1 year
- Be a for-profit business. Non-profit agencies can not apply
- Have a physical address P.O. box as mailing address only
- Operate in a rented or owned commercial space

#### The following businesses are not eligible for this grant:

- Home-based businesses
- Essential businesses allowed to remain open throughout the COVID-19 pandemic
- Independent contractors
- Businesses that are not in District 5, or relocate out of District 5 during the process
- Businesses that are a part of a national chain
  - \*\* Applicants can only submit an application for 1 business if multiple applications are submitted by the same business owner only 1 will be considered for funding \*\*



# **REQUIRED DOCUMENTS**

The following documents are <u>required</u> to be considered for this grant. Incomplete applications will not be considered. Please use this page as a checklist to ensure your application is complete upon submission.

All documents must be emailed to <u>SmallBusinessD5@miamidade.gov</u>. Documents mailed or dropped off to any of the District 5 offices will <u>not</u> be considered. Applicants can send each document as separate attachments OR send include them all in 1 PDF.

	Completed application forms including:
	Identifying Information page Employee Roster
	Employee Roster
	Application Questions
	Request for Opinion (ONLY if you serve on a Miami-Dade County Board or you're a Miami-
	Dade County employee)
	Copy of of Sunbiz page showing business has been in operation for at least 1 year
	Copy of active State of Florida Corporation and/or Fictitious Name (Can be found
0	n SunBiz if applicable)
	Copy of current year's Miami-Dade County Business Tax (LBT) certificate or paid receipt
	Copy of City License (City of Miami or City of Miami Beach) or paid receipt
	Copy of your State of Florida Professional License if it applies to your business. You may
f	ind your license here
	Copy of Photo ID (driver's license or State ID)find
	W-9 for your business
	Photo of the outside of the business / commercial space



# **IDENTIFYING INFORMATION**

Business Name (As it appears on Sunbiz)*:					
Business Address:					
Owner's Name:					
Owner's Primary Phone Number:					
Alternative Phone Number:					
Owner's Primary Email Address:					
Owner's Home Address:					
Preferred Mailing Address:					
A Data Universal Numbering System (DUNS) number is REQUIRED. Apply for DUNS Number Here: https://dashboard.dnb.com/register or via telephone at 1-800-700-2733.  Print DUNS Number Here:					
Type of Business : Select One					
Other type of business:					
Business FEI/EIN:					

<sup>\*</sup>Please verify that the business name stated is correct and there are no grammatical or punctuation errors. If your business is registered under a DBA, please make sure to state as such.



# **EMPLOYEE ROSTER AS OF MARCH 19, 2020**

Number of **Employees** 

Full Time:

art Time:					
Employee Name (Print)	Date of Hire	Hourly Rate	Job Title*	Full Time (FT) or Part Time (PT)	Race**

I hereby certify that the information provided is true and correct. I further acknowledge that the information is subject to verification by authorized government officials.

Owner Signature	Date

\*Job Title: Officials and Managers, Technicians, Craft Worker (Skilled), Laborer (Unskilled), Sales Professional, Office and Clerical, Operative (Semi-Skilled), Service Workers \*\*Race: W-White, B-Black, A-Asian, Al-American Indian, H-Hispanic, O-Other



# **APPLICATION QUESTIONS**

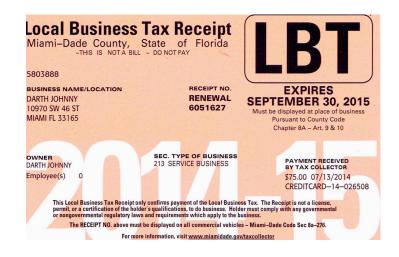
The answers to the following questions should be typed on a separate document and submitted with the other application materials. Please keep your answers to these questions to 2 pages maximum. Any additional pages will not be considered.

- 1. How long have you been in business?
- 2. Have you received District 5 Mom and Pop funding in the past? If so, what year?
- 3. Are you or any shareholders employed by Miami-Dade County? If yes, what department?
- 4. Describe your business and the services or goods you offer to the community.
- 5. Has your business reopened? If not, what are your plans regarding the resuming of your operations?
- 6. Have you participated in any Small Business Training in the past? If so, what programs and when?
- 7. Have you received municipal, state, and/or federal small business relief funds during the COVID-19 pandemic such as PPP, EIDL, State of Florida Disaster Bridge loan, etc.? If yes, what type of aid, how much, and when?
- 8. Do you offer any benefits to your employees, such as paid time off, sick leave, health insurance, etc.?
- 9. Does the business participate in community service or contribute to community organizations?



# **EXAMPLES OF REQUIRED LICENSES AND DOCUMENTS**

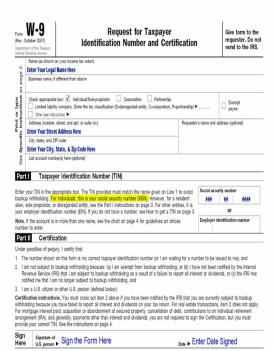
All the documents and licenses submitted **MUST** have the correct name listed. Please verify the spelling and punctuation for each one.



Miami-Dade County License

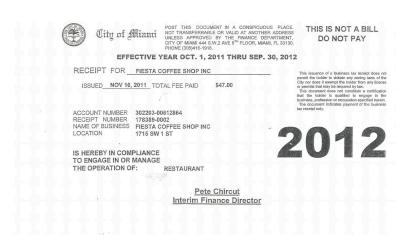


Florida Professional License



W-9





City of Miami License



City of Miami Beach License



Department of State / Division of Corporations / Search Records / Search by Entity Name /

Previous On List Next On List Return to List 99 service
Search

Events No Name History

#### **Detail by Entity Name**

Florida Limited Liability Company 99 SERVICES, LLC

#### Filing Information

 Document Number
 L14000146918

 FEI/EIN Number
 47-1943182

 Date Filed
 09/18/2014

 State
 FL

 Status
 INACTIVE

Last Event ADMIN DISSOLUTION FOR ANNUAL REPORT

Event Date Filed 09/23/2016
Event Effective Date NONE

Principal Address 6724 SW 28TH STREET MIAMI, FL 33155

Mailing Address 6724 SW 28TH STREET MIAMI, FL 33155

#### Registered Agent Name & Address

MONTES-MONTO, ALEJANDRO M 6724 SW 28TH STREET MIAMI, FL 33155

# SunBiz.Org with visible FEIN number



#### **Fictitious Name Detail**

Fictitious Name THE MIGHTY Filing Information G13000028288 Registration Number ACTIVE Filed Date 03/22/2013 **Current Owners** County Total Pages MIAMI-DADE **Events Filed** FEI/EIN Number 46-2309928 Mailing Address Owner Information ALMANAC LLC 2224 CORAL WAY MIAMI, FL 33145 FEI/EIN Number: 46-2309928 Document Number: L13000031075



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# REQUEST FOR OPINION FROM COMMISSION ON ETHICS **ACQUIRING FINANCIAL INTEREST**

l,	, the owner or president of						
(Owner or President Name	)	(Business Name)					
whose business address is							
	(Business Addr	ess, City, State, Zip)					
(Ph	none #)	(Email)					
Include a short description of the type of business operating							
Are you currently an employee or board member of any Miami Dade County Board?  Yes No							
If yes, what Department or I	Board?						
If yes, are you seeking to co	ontract with Miami Dade Co	unty? Yes No					
I am being considered for funding through the Mom and Pop Small Business Grant Program and request clearance from the Commission on Ethics. Please review my request and forward to the Office of Commissioner Eileen Higgins, SmallBusinessD5@MiamiDade.gov.  Thank you in advance for your attention to this very important matter.							
Signature		Date					