Miami-Dade County Community Action and Human Services Department (CAHSD)
Beautification Program Overview

- The Beautification Program for owner occupied single-family detached homes in District One (1) provides homeowners with exterior painting and landscaping assistance

- Participation in the Program is subject to availability of funds and is subject to change without notice. Loans will be provided based on a first come first served basis.

- Miami-Dade County will provide financing through Public Housing and Community Development for the painting and landscaping to your home. Contractors to do the work will be assigned by Miami-Dade County. Property Owners must select one color combination from a palette of eight (8) paint color combinations and one landscape design from three (3) landscaping options. After work has been completed the County will reimburse the contractor from funds secured by the forgivable loan executed by the owner not to exceed fifty nine hundred ($5,900.00) dollars per property. Loan service fee, documentary stamps, recording fees and Construction Administration fees are included in the loan amount.

- 5 year lien will be placed on the home, until the loan is forgiven.

- *Assuming the resident uses the maximum amount of the loan, $5900.00.

  1. (12 months) 5899.80
  2. (24 months) 4719.84
  3. (36 months) 3539.88
  4. (48 months) 2359.92
  5. (60 months) 1179.96
  6. (61 month) 0.00

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- The requirements to qualify for this program are as follows:

A. Be the owner / occupant of the home.
B. The home is a single family home (not an apartment or duplex).
C. Not own other investment properties.
D. Meet the maximum income requirements listed in the table below:

Household Size	Income Limit*
1	$ 89,600.00
2	$102,480.00
3	$115,220.00
4	$127,960.00
5	$138,320.00
6	$148,540.00
7	$158,760.00
8	$168,980.00

*Effective May 2020

E. The home is located in the following target area:

District One (1)

Miami-Dade County Community Action and Human Services Department (CAHSD)
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If you qualify for the Beautification Program then the following documents MUST be submitted:

1. A copy of the last completed tax return, and W-2, if employed.
2. One full month of pay check stubs for all employed individuals living in the household, if employed.
3. If not employed and you receive retirement's pension or social security benefits then submit a copy of the award letters.
4. Picture I.D. of applicant and household members.
5. Copy of Social Security Cards for all household members and Birth Certificates.
6. Property taxes shall be current and in paid status.
7. Most recent mortgage statement.
8. Electric Bill and Water Bill
9. Copy of warranty deed.

County Employees or Relative of County Employee Seeking Assistance from Public Housing and Community Development - Other Than Section 8 Vouchers

*Please submit the following information by mail, fax, **or** email to:*

Gilma Diaz-Greco, Staff Attorney
The Commission on Ethics and Public Trust
19 West Flagler Street, Suite 820
Miami, FL 33130

Phone: (305) 350- 0638
Fax: (305) 579-0273
Email: gdiazgr@miamidade.gov

☐ **County Employee**

Employee's Name _____

Employee's Dept. and Section _____

Employee's Title _____

Employee's Job Description and Duties _____

Supervisor's Name _____

Supervisor's Phone Number and Email _____

Employee's Mailing Address _____

Employee's Phone Number _____

Employee's Email _____

☐ **Immediate Family Member of County Employee**

(Miami-Dade County's Ethics code at Section (b)(9) defines "Immediate Family" as spouse, domestic partner, parents, stepparent, children, and stepchildren)

Your Name _____

Your Mailing Address _____

Your Daytime Phone Number _____

Your Email _____

Name of County employee _____

What is the relationship? (spouse, child, parent, etc...) _____

County employee's department or division _____

County employee's title _____

List names, titles, and departments of any other immediate family members currently employed by Miami-Dade County _____

Please check below the PHCD of Loan or Rental Assistance program:

Section 8 Programs

(Those wishing to file to become **Section 8 Landlords** must complete the COE application for Section 8 Landlords at: http://ethics.miamidade.gov/frequently-used-forms.asp)

- ☐ Housing Choice Voucher (HCV)
- ☐ Project-Based Voucher (PBV)
- ☐ Veterans Affair Supportive Voucher (VASH)
- ☐ Moderate Rehabilitation
- ☐ Substantial Rehabilitation
- ☐ Shelter Plus Care (S+C)

Other Rental (not Section 8 related) and Mortgage Programs

- ☐ Public Housing Rental
- ☐ Tenant-Based Rental Assistance (TBRA-maximum 2years)
- ☐ Home-ownership Second Mortgages
- ☐ Home-owner Rehabilitation Program
- ☐ Home-owner Beautification Program
- ☐ Other (please list): _____

The Miami-Dade County Conflict of Interest & Code of Ethics at Sec. 2-11.1 (c)(5)(5) allows County Employees and their immediate family members to apply for direct housing assistance programs from the County's Public Housing and Community Development department (PHCD) if they meet certain conditions and if the following criteria are met. Please check one of the following categories and affirm that you meet the criteria for that category:

☐ County Employees:

1. I am eligible to receive such assistance from PHCD.
2. I do not work in PHCD, the department that enforces, oversees, or administers the contract.

☐ PHCD Employee:

1. I am eligible to receive such assistance from PHCD.
2. I will not participate in the administration of the program during the entire term of the loan or rental assistance provided.

☐ Immediate Family Member of a County Employee

1. I am an immediate family member of an employee who is not employed by the County Public Housing and Community Development department.
2. I am eligible to receive such assistance from PHCD.

I affirm that the information I have provided is true and I pledge to abide by the requirements listed here.

_____ _____

Signature Date

Your ethics opinion will be sent to by first class mail and email. Please submit the letter to the PHCD department.