



Commissioner Joe A. Martinez  
District 11

Miami-Dade County Commissioner  
Mom And Pop Small Business Grant Program

**Application**

***Submit 1 original completed application with requested documents.***

***We suggest you keep a copy for your records.***

***Attention Business Owners***  
**Miami-Dade County**  
**District 11**

**Mom and Pop Small Business Grant Program**

**Grant Money Available!**  
**Up to \$3,500.00 per business**

Applications available  
**April 26, 2021 through May 10, 2021**

**PICK UP APPLICATIONS AT:**  
Commissioner Joe A. Martinez District Office  
4081 SW 152<sup>nd</sup> Ave  
Miami, FL 33185  
Phone: 305-552-1155

Applications online April 26, 2021 at [www.miamidade.gov/district11](http://www.miamidade.gov/district11)

There will be an informational workshop explaining program requirements  
May 5, 2021 at 10:00 am via Zoom  
Meeting ID: 916 6917 8628

Passcode: 568206

<https://zoom.us/j/91669178628?pwd=UHBELzdlWmJUM2lzRFVqTHp4UzIUdz09>

**Please be on time!**

Completed applications will be accepted from May 11<sup>th</sup> – May 17<sup>th</sup> by 3:00 pm  
Hand deliver application **in a sealed envelope** to **District Office**  
**No late applications will be accepted!**

For additional information contact: Victoria Goss at 305-756-0605  
**Neighbors And Neighbors Association (NANA)**

**Submit 1 original completed application with requested documents.**

**We suggest you keep a copy for your records!**

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# **2020-2021 MOM AND POP SMALL BUSINESS GRANT PROGRAM**

## **Brief Description**

The Miami Dade County Mom And Pop Small Business Grant Program was created by Neighbors And Neighbors Association, Inc. in 1999 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, and this relationship will ultimately bridge the gap between the two entities.

- The program provides financial assistance to further the economic viability of recipients. Funding can be used to purchase inventory/supplies, business equipment, marketing/advertising, building/business insurance, minor interior/exterior renovations, security systems (commercial property only), work vehicle (pick-up truck or cargo van- must be registered in business name) professional services, (CPA, business training, seminars and events), or commercial property lease or mortgage only.
- Technical assistance is made available at no charge, 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, form/foster better working relationships among small business owners, retain and eventually create more jobs, offer the necessary training that small business owners so desperately need to become more efficient and competitive, etc.

The program is offered in each 13 Miami Dade County Commission District, as a result, we recognize that the needs of each district are different and our goal is to address this diversity. In order to receive the correct guidelines to be considered for funding, you must apply in the county district where your business is located. To locate your district where your business is located, please call 311 or visit <https://www.miamidade.gov/global/government/commission/home.page> under "Who is my Commissioner?" enter your business address and submit. **Applications and start date for each district may differ, therefore, please be sure to pick up the appropriate application.**

**Miami-Dade County  
Mom and Pop Small Business Grant Program  
FY 2020-2021  
Guidelines**

**Commissioner Joe A. Martinez Mom and Pop Small Business Grant Program is offering grant applications for small business owners.**

**All businesses must be located in District 11 and meet the following eligible criteria:**

- Business must be in operation for at least 1 year.
- Must be a for-profit business.
- A physical address is required. No P.O Box as mailing address allowed.
- Home – base businesses can apply.
- The Selection Committee can consider special projects.

**AUTOMATIC DISQUALIFICATION:**

- Businesses that relocate out of the district during the process.
- Businesses that received funding last year must sit out one year before applying again.
- Applications will not be accepted after deadline.
- Non-profit agencies can not apply.
- More than one application submitted for the same owner(s), family member, or partners.
- Must not be part of a national chain.

**The Selection Committee**

Has the right to request additional information, accept, or reject any and all applications.

**Information Workshop (via zoom)**

All businesses applying for funding are encouraged to attend this meeting, to learn about the program requirements. All questions will be answered only during this time.

Attending the workshop does not guarantee your business will receive funding.

**Wednesday, May 5, 2021 at 10:00am**

**Meeting ID: 916 6917 8628**

**Passcode: 568206**

**<https://zoom.us/j/91669178628?pwd=UHBELzdIWmJUM2lzRFVgTHp4UzlUdz09>**

**PLEASE BE ON TIME!**

**Please have a copy of the application**

**We recommend, you do not complete the application before the workshop.**

**Application procedures and required attachments (please include the following documents below along with your application):**

- Submit one original completed application typed or printed with all requested documents.
- Provide proof that the business has been in operation for one (1) year or more. Example: any old license, state corporations, sales tax, or utility bill) or any legal document proof must be in business name (include copy only).
- Submit a current Miami Dade County Local Business Tax Receipt or a paid receipt (include copy only). If Miami-Dade County business tax receipt reads “Operating in Miami-Dade” a City Business Tax Receipt is required as well.  
**If business tax receipt not required by Miami-Dade County, applicant must provide written proof from Miami Dade County Tax Collector’s Department located at 200 NW 2<sup>nd</sup> Ave Miami, FL 33128.**
- Submit a copy of your **active** State of Florida Corporation **and/or** Fictitious Name (print copy by visiting sunbiz.org), in addition, a FEIN # must be listed on sunbiz print out if business is incorporated. If not, provide a copy of business IRS letter 147c (showing business FEIN #)
- Provide copy of valid picture ID (Driver’s License or State ID) of **owner or president** ONLY.
- Submit outside picture of business location (building, home office, or work vehicle).
- Elected official, Government Board Appointee, and/or a Miami-Dade County employee, must get written approval stating no Conflict of Interest from the Miami-Dade County Commission on Ethics.
- Miami Dade County Employees must include written approval from Department Director for outside employment.
- Submit State Professional License, if required (Example: Cosmetology license, Realtor license, Contractor license, etc.)

**Links to access professional license**

For Child Care Facilities: <http://dcfsanswrite.state.fl.us/Childcare/provider/ProviderSearch.aspx>

For Medical Personnel: <https://apps.mqa.doh.state.fl.us/IRM00PRAES/PRASLIST.ASP>

For Adult Day Care Facilities and Assisted Living Facilities (ALF):  
<http://www.floridahealthfinder.gov/facilitylocator/FacilitySearch.aspx?cc=11>

For Beauty Parlors, Restaurants, Bakery, etc.: <https://www.myfloridalicense.com/wl11.asp?mode=0&SID=>

For Security Firms: [licensing.freshfromflorida.com/access/agency.aspx](https://licensing.freshfromflorida.com/access/agency.aspx)

For Regulated Industries: [myflorida.com/licensee/cat/](https://myflorida.com/licensee/cat/)

For Regulated Health Fields: <http://www.floridahealth.gov/licensing-and-regulation/index.html>

## **ELIGIBLE USE OF FUNDING:**

- Inventory / Supplies
- Business Equipment
- Marketing / Advertising
- Commercial Liability Insurance
- Minor Interior / Exterior Renovations
- Security System for commercial space only
- Work Vehicle (pick up truck or cargo van) must be registered in the business name
- Professional Services (Accounting, Business Training, Seminars, and events)
- Lease or mortgage for commercial space only

## **INELIGIBLE USE OF FUNDING:**

- Rental Deposits
- Late Payment Fees
- Purchase of Alcohol, Tobacco or Medicine
- Debts
- Salaries
- Property taxes
- County, City and or State license(s)
- Any and all others not listed in the eligible use above.

**FY 2020-2021  
Applications Forms  
Mom and Pop Small Business Grant Program**

Date: \_\_\_\_\_

**A. Identifying Data**

Business Name (as it appears on Sunbiz)	
Doing Business As (DBA) Name (if applicable, as it appears on Sunbiz)	
Business Address	
Business City & Zip Code	
Business and Cell Phone #	
Email Address	
Kind of Business Operating	
President or Owner Name	
President or Owner Home Address	
President or Owner City & Zip Code	

<p>Provide: Data Universal Numbering System, known as DUNS number or proof applied for is <b>REQUIRED</b> at the time of application.</p> <p><b>Apply at: <a href="https://www.dnb.com/duns-number/get-a-duns.html">https://www.dnb.com/duns-number/get-a-duns.html</a></b></p> <p><b>Contact Number: 1-844-543-8109</b></p>	<p>_____</p> <p>Print DUNS Number Here</p>
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**B. Amount Requested**

<b>Funding Request Amount</b>	<b>\$</b>
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**D. Business owners are required to provide the following information:**

1. How long have you been in business? Number of years \_\_\_\_\_ months \_\_\_\_\_
  
2. Have you received Mom and Pop funding in the past? Yes \_\_\_\_\_ No \_\_\_\_\_
  - o If yes, last time you received funding (year) \_\_\_\_\_
  
3. Are you or any other shareholder employed by Miami-Dade County? Yes \_\_\_\_\_ No \_\_\_\_\_
  - o If yes, what department? \_\_\_\_\_
  
4. Would you be willing to participate in any offered business workshop training? Yes \_\_\_\_\_ No \_\_\_\_\_
  
5. If awarded the full amount allowed by the program, knowing that the funding cannot be used for salaries/payroll, would you still be able to create a new job? Yes \_\_\_\_\_ No \_\_\_\_\_  
  
Will the new job be full-time? Yes \_\_\_\_\_ No \_\_\_\_\_

**E. BUSINESS INFORMATION**

1. Describe your Business:

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2. What kind of goods or services your business offers to the community?

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3. Briefly describe how the funds, if awarded, will be used to help grow your business:

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***My signature below indicates the information submitted on this document is true to the best of my knowledge.***

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Request for Opinion from Commission on Ethics Acquiring Financial Interest

I, \_\_\_\_\_, the owner or president of  
(Owner or President Name)

\_\_\_\_\_, whose business address is  
(Business Name-please include DBA if applicable)

\_\_\_\_\_,  
(Business Address, City, State, Zip)

\_\_\_\_\_  
(Phone #) (Email)

Include a short description of the type of business operating \_\_\_\_\_

**Are you currently employed or a board member of any Miami Dade County Department? Yes \_\_\_ No \_\_\_**

If yes, what Department or Board? \_\_\_\_\_

If yes, are you seeking to contract with Miami Dade County? Yes \_\_\_\_\_ No: \_\_\_\_\_

I am being considered for funding through the Mom and Pop Small Business Grant Program and request the clearance from the Commission on Ethics. Please review my request and forward to Neighbors And Neighbors Association, Inc. to the attention of Leroy Jones, Executive Director, 5120 NW 24<sup>th</sup> Ave, Miami, FL 33142 or fax (305) 756-6008. Thank you in advance for your attention to this very important matter.

Commissioner Joe A. Martinez  
4081 SW 152<sup>nd</sup> Avenue Unit 21  
Miami, FL 33185

**This page must be completed.**

## APPLICATION CHECKLIST

### ALL DOCUMENTS MUST BE INCLUDED

1. **One original** completed application with requested documents.
2. Provide proof that the business has been in operation for one (1) year or more. Example: any old license, state corporations, sales tax, or utility bill) or any legal document proof must be in business name (**include copy only**).
3. Copy of the Miami-Dade County: Local business Tax Receipt (LBT) or Paid Receipt. If Miami-Dade County business tax receipt reads "Operating in Miami-Dade" a City Tax Receipt is required as well.

**If LBT is not required by Miami-Dade County, please provide written proof from Miami Dade County Tax Collector's Department located at 200 NW 2<sup>nd</sup> Ave Miami, FL 33128.**

4. Submit a copy of your active State of Florida Corporation and/or Fictitious Name from sunbiz.org if incorporated. **FEI/EIN # must be listed on State of Florida print out if not listed submit IRS letter 147C (this includes the FEI/EIN number)**
5. Picture ID (Driver's License or Florida ID) for **owner or president** of the business
6. Picture of business location with address (building, home office or work vehicle)
7. If required, State Professional License (Example: Cosmetology license, Realtor license, Contractor license, etc.)
8. **If applicable**, Elected official, Government Board Appointee, and/or a Miami-Dade County employee, you must get written approval stating no conflict of interest from the Miami-Dade County Commission on Ethics.
9. **If applicable**, Miami Dade County Employees must include written approval from Department Director for outside employment.

Additional information may be requested to determine application eligibility.

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date