



Community

Redevelopment Agency

Area Improvement & Redevelopment Grants Program

NW 79TH STREET AIRG APPLICATION

APPLICANT INSTRUCTIONS -

To be considered for grant funding under the CRA's AIRG program, applicants must submit a complete application package, provide all requested documents and become a registered Miami-Dade County vendor (if not already registered). Be sure to read all program requirements for the various grant programs in the Sections detailed above.

GRANT APLOCATIONS WILL BE PROCESSED ON A FIRST-COME, FIRST-SERVED BASIS UNTIL ALL FUNDING HAS BEEN EXHAUSTED. COMPLETED APPLICATIONS CAN BE SUBMITTED TO AGENCY GRANTS ADMINISTRATOR VIA: IN-PERSON, E-MAIL, U.S. MAIL OR BY SCAN

Neighbors and Neighbors Association, Inc. (NANA)
Grants Coordinator, NW 79th Street Community Redevelopment Agency
5120 N.W. 24th Avenue Miami, FL 33142
E-mail: 79stcorridor@nanafll.org
(305) 756-0605 Fax: (305) 756-6008

APPLICATION SECTIONS -

Section 1: Certification and Signature Form

This form must be signed by the CEO, Managing Principal, Majority Owner, or Corporate Officer with the power to bind the organization to contracts (signature authority).

Section 2: Business/Company Background

This section must be completed in its entirety to provide the Agency with enough information about your business/company.

Section 3: Proposed Use of Funds

This section outlines eligible and non-eligible grant expenditures and requires detailed proposed use.

Section 4: Statement of Need & Impact

This section must clearly state the need for CRA funding and how CRA funding would impact your business.

Section 5: Job Creation/Economic Impact

This section must clearly state the job creation or retention and the economic impact CRA funding would have on your business.

Section 6: Corporate Information

Must be provided by the Applicant and attached as an Appendix to this Application. See the complete list of information items in Section 5 of the application.

Business/Company Name: _____

Contact Person Name: _____

Telephone Number: () _____ Fax Number: _____

SECTION 1. CERTIFICATION STATEMENT AND SIGNATURE FORM

The undersigned, by submitting this proposal, certifies that:

The legal name of the Business/Company submitting this application is:

- 1. I am the Sole Proprietor, President, CEO, or other Officer of the Company, and as such I have full authority to make this affidavit and execute all agreements on behalf of the organization;
- 2. The information given herein and, in the documents, attached hereto are true and correct;
- 3. The documents and this certification are factual material representations which the NW 79th Street Community Redevelopment Agency ("Agency") may rely on when determining whether to award grant funds to the above-referenced organization;
- 4. The submission of all required documents and this application are a prerequisite for this transaction;
- 5. In submitting this application, the Organization agrees with all the terms, conditions, and specifications required by the Agency in this grant application, and that the Organization fully understand its contents; and
- 6. The Agency reserves the right to deny the application if it is determined that the documents submitted and the contents therein are not true and correct, or if such documents contain inaccurate or fraudulent information.

I/We have read and understand the foregoing. The information submitted on this document is true to the best of my knowledge.

Name/Title

Signature

Date

Name/Title

Signature

Date

SECTION 2: BUSINESS/COMPANY BACKGROUND

Funding Requested: \$ _____

APPLICANT/OWNER INFORMATION

Name of Applicant: _____

Address: _____

City, State, Zip Code: _____

Phone Number: () _____ E-mail: _____

BUSINESS INFORMATION

Legal Name of Business: _____

Business Address: _____

Business Phone: () _____ Business E-mail: _____

Business Website Address: _____

Federal Tax ID #: _____ Date Established: _____

Check Business Type: _____ Sole Proprietorship _____ Corporation _____ Partnership _____ Other

_____ Own _____ Rent _____ Contract for Deed _____ Mortgage Principal: \$ _____

Lessor: _____ Terms of Lease: _____ Monthly Lease: \$ _____

Business/Company Ownership Interest of all parties named on title: (Add additional, if needed)

Name: _____ Interest: _____ %

Name: _____ Interest: _____ %

Name: _____ Interest: _____ %

Name: _____ Interest: _____ %

Current Gross Annual Revenue: \$ _____

PROPERTY INFORMATION

Estimated Date of Building Construction: _____ Estimated Current Tax Market Value: \$ _____

Has this Building been historically registered? Yes or No If Yes, please attach information to this Application.

of Stories: _____ # of Businesses: _____ # of Buildings: _____ # of Apartments: _____

Does this building have any County or State Code Violations? _____ Yes or _____ No If yes, please attach detailed information to this Application.

Does this building have any local, State or Federal Liens? _____ Yes or _____ No If yes, please attach detailed information to this Application.

Describe your Organization’s Business — products produced, services provided, etc.:

Total Project Cost \$ _____ Amount of Agency funding requested by Applicant \$ _____

SECTION 3: PROPOSED USE OF FUNDS

Eligible commercial improvements funded by the Agency’s Grant Programs include, but are not limited to the following:

Exterior / Interior Lighting or Painting	Surface Parking Lot Improvements	Window or Door Replacement	Landscaping or Irrigation for Landscaping	Landscaping and Streetscape Items Attached to the Building or on the Property	Commercial Liability Insurance
Water and Sewer Hook-up	Resolution of Code Violations	Historic Storefront Restoration	Improvements required by the Americans with Disabilities Act (ADA)	Manufacturing Equipment and Tools	Professional Services (i.e., CPA, Attorney, Etc.)
Roof Replacement/ Repairs	Siding, Masonry or Stucco Facing	Exterior Signs	Additions/ Expansion to Existing buildings	Fences and Gates	HVAC upgrades
Vehicles Used for Business Purposes (pick-up trucks, cargo vans, light and heavy trucks, and passenger vans)		Awnings, Canopies and Shutters		Design Plans, Specifications, Labor, Materials, Equipment, Fees and Services Associated with Improvements	

Grant funds will not be approved, and cannot be used, for day-to-day operating expenses and the items detailed below:

- Debt
- Mortgage payments for real estate
- Real estate rental deposits or rent payments (except if approved under the Business Attraction & Expansion Grant)
- Purchasing inventory for resale
- Consultant fees or expenses for services (i.e., cleaning, etc.)
- Late payment fees
- Purchase of alcohol, tobacco or medicine
- Salaries
- Utility Bills
- Any illegal activity
-

Description of Project Need:

How will the CRA funding received by your business impact the CRA's Redevelopment Area and its residents?

***Estimated Costs for CONSTRUCTION/Related Project for the RRG or BAEG Grant Programs**

Provide detail regarding planned improvements for which the grant is being requested.			
	Improvement Type	Description	Estimated Cost
1			
2			
3			
4			
5			
6			
Total Estimated Construction Cost:			\$

*If additional space is needed to provide more detailed information, please attach to application.

***Estimated Costs for EQUIPMENT for the SBTIG Grant Program**

Provide detail regarding equipment to be purchased and/or leased using the approved grant. All equipment purchased with grant funds must include a warranty of no less than (3) years to ensure continuous support and to reduce future costs related to repair or replacement. The inclusion of a warranty will allow the project to maintain operations without interruption due to equipment failure. Only complete this page if the SBTIG grant that you are applying for will be used to procure CRA-eligible technology and equipment items. Prior to reimbursement under the SBTIG grant, serial numbers will be required for all items purchased/leased.

	Improvement Type	Description	Estimated Cost
1			
2			
3			
4			
5			
6			
Total Estimated Equipment Cost: \$			

*If additional space is needed to provide more detailed information, please attach to application.

SECTION 4: STATEMENT OF NEED AND IMPACT

1. Will the grant funding retain/maintain any existing position within your business/company? If so, please explain in detail how this funding will retain/maintain positions, the number of positions and the type of positions.

2. Will the grant funding enhance the skill sets of any current position within your business? If so, please explain in detail how this funding will enhance the skills of your employees.

3. Will the grant funding create new positions at your business? If so, please explain in detail how this funding will create new positions, the number of new positions which will be created and the type of new positions.

4. Will the grant funding increase your sales revenue, improve your competitiveness, expand your business' market position, and/or allow you to enter a new market? Please explain in detail.

5. Will the grant funds improve operations, increase efficiency, or reduce costs and/or energy consumption? Please explain in detail.

SECTION 5: JOB CREATION/ECONOMIC IMPACT/COMMUNITY BENEFIT

BUSINESS/COMPANY NAME:	
1. How many years has your business been in operation?	
2. How many years of experience dos the majority owner have in this business?	
3. Is your business a minority or women-owned business enterprise (MWBE)?	
ECONOMIC IMPACT	
4. How do you plan to meet the specific priorities of the Agency and provide an economic impact along the NW 7th Avenue corridor?	
JOBS & JOB CREATION	
5. How many of your current employees earn less than \$27,400 per year? _____ More than \$27,400? _____	
6. How many new jobs will be created, if your business receives the requested grant funding?	
7. How many new jobs will be created earning more than \$27,400 per year, if your business receives the requested grant funding?	
8. How many of your businesses' current positions require more than a high school education/diploma?	
9. How many new jobs created by this grant will require more than a high school education or diploma?	
10. If any new jobs will be created because of this grant, insert the number of each type of position that will be newly created. (Refer to listing of occupations category definitions on page 21.) _____ Professional _____ Craft Worker _____ Sales _____ Technician _____ Operative _____ Laborer _____ Office/Clerical _____ Service Worker _____ Other: _____	
11. What are the new positions which will be created: _____	
INVESTMENT AND USE OF FUNDS	
12. What is the total project cost/investment?	\$
13. What is the total amount of grant funding being requested in this application?	\$
OPERATIONAL READINESS	
14. Is your business permitted by applicable Miami-Dade County Zoning to operate on the property?	___ Yes ___ No
COMMUNITY BENEFIT	
15. Overall, how will this grant funding benefit the community and residents of the CRA?	

**OCCUPATIONAL CATEGORY DEFINITIONS
(SECTION 5, QUESTION #10)**

Professional – Occupants requiring either college graduation or experience and includes: accountants and auditors, airplane pilots and navigators, architects, artists, chemists, designers, dietitians, editors, engineers, lawyers, librarians, mathematicians, natural scientists, registered professional nurses, professional and labor relations workers, physical scientists, physicians, social scientists, and teachers.

Technicians – Occupants requiring a combination of basic scientific knowledge and manual skill which can be obtained through two (2) years of post-high school education including many technical institutions and colleges or through equivalent on the job training. This includes: computer programmers and operators, drafters, engineering and mathematic aides, junior engineers, licensed practical or vocational nurses, photographers, radio operators, scientific assistants, surveyors, technical illustrators, and technicians (medical, dental, electronic physical science).

Sales – Occupants engaging wholly or primarily in direct selling. This includes: advertising agenda and sales workers, insurance agents and brokers, real estate agents and brokers, sales workers, demonstrators and retail sales workers and sales clerks, grocery clerks and cashiers and kindred workers.

Office and Clerical – Includes all clerical-type work regardless of level of difficulty, where the activities are predominantly non-manual. This includes: bookkeepers, cashiers, bills and accounts collectors, messengers and office helpers, office machine operators, shipping and receiving clerks, stenographers, typists and secretaries, telephone operators, and kindred workers.

Craft Worker (skilled) – Manual workers of relatively high-level having a thorough and comprehensive knowledge of the processes involved in their work. Exercise considerable independent judgment and usually receive an extensive period of training. This includes: the building trades, supervisors and lead operators (who are not members of management), mechanic and repairers, skilled machining occupations, compositors and typesetters, electricians, engravers, job setters (metal), motion picture projectionists, pattern and model makers, stationary engineers, and tailors.

Operatives (semi-skilled) – Workers who operate machines or other equipment or perform other factory-type duties of intermediate skill level which can be mastered in a few weeks and require only limited training. This includes: apprentices (auto mechanics, plumbers, electricians, machinists, mechanics, building trades, metal working trades, printing trades, etc.), operatives, attendants (auto service and parking) plasterers, chauffeurs, delivery workers, dress makers and sewers (except factory), dryer's furnaces workers, heaters (metal), laundry and dry cleaning, operatives, milliners, laborers, motor operators, pliers and greasers, painters, photographic process workers, boiler tenders, truck and tractor drives, weavers (textile), welders and flame metals workers.

Laborers (unskilled) – Workers in manual occupations which generally require no special training to perform elementary duties that may be learned in a few days and require the application of little or no independent judgment. This includes: garage laborers, car washers and greasers, gardeners (except farm) and groundskeepers, stevedores, wood choppers, and laborers performing lifting, digging, mixing, loading and pulling operations.

Service workers – Workers in both protective and non-protective service occupations. This includes: attendants (hospital and other institutions, professional and personal service, including nurses' aides and orderlies), barbers, chair workers and cleaners, cooks, counter and fountain workers, elevator operators, firefighters and fire protection guards, door keepers, stewards, janitors, police officers and detectives, porters, waiters and waitresses and kindred workers.

SECTION 6: BUSINESS/CORPORATE INFORMATION ITEMS

Please attach copies of the following items to your completed application:

1. Proof that business address falls within the Redevelopment Area. A physical address is required. No P.O. Box as a mailing address is allowed. (See map above on page 3 of this document).
2. Photos which clearly identify the front, back and sides of the business/company.
3. IRS 147C Letter.
4. Current certificate of status from the business/company's filing with SunBiz, showing that the business/company is currently active and is in good standing in the State of Florida.
5. Copy of the Miami-Dade County, Local Business Tax Receipt (Occupational License). Business/Company name on application must match the license. If a license is not required by the County, must provide a written statement from the County Tax Collector's Office (<https://county-taxes.net/fl-miamidade/business-tax>)
6. Proof that the business has been operating for at least two (2) years. (Example: any old License, State Corporations, Sales Tax, or utility bill). Proof must be in the business/company name.
7. Valid Government-Issued Photo ID of the Managing Principal, CEO, or majority owner of the business who is authorized to sign the Grant Application package and empowered to legally enter into contracts.
8. Filed business tax returns for the calendar years 2022 and 2023. Please strikethrough or black-out all social security numbers and other sensitive or private information before submitting the application.
9. Verifiable proof of funds — current business/company bank statement or proof of funds letter from Applicant's banking institution.
10. If the business/company is using additional funds, please supply: 1) an approval letter, 2) other debt funding approval document, 3) funding commitment letter or 4) contract from the source of additional funds.
11. Elected officials and government Board appointees applying for a grant from the CRA, must provide written approval from the County's Commission on Ethics & Public Trust, indicating that no conflict of interest will be created should a CRA grant be awarded to your business/company. See page below for the *Request for Opinion from the Miami-Dade County Commission on Ethics & Public Trust Form*.
12. If applicable, provide Applicant Company's Unique Entity Identifier (UEI). The UEI is a 12-character alphanumeric ID assigned to an entity by SAM.gov. If you do not have a UEI number, one can be obtained free-of-charge at <https://sam.gov/content/home>.

Please note that the Agency may require additional information/documents as a condition of application review and/or grant award.

**Request for Opinion from the Miami-Dade County
Commission on Ethics & Public Trust**

Acquiring Financial Interest

I, _____, (Owner/President Name) the owner or president of
_____(Business Name), whose
business address is, _____ (Address, City, State,
Zip
Code)

Are you currently an employee of Miami-Dade County? _____Yes _____ No

If yes, what Department? _____

Do you currently serve on any Miami-Dade County Board(s)? _____Yes _____ No

If yes, please list: _____

Are you an elected official of Miami-Dade County? _____Yes _____ No

If yes, please list office held: _____

I am applying for grant funding through the NW 79th Street Community Redevelopment Agency (CRA) and have been asked to request an Opinion or clearance from the Miami-Dade County, Commission on Ethics & Public Trust, on whether this creates a conflict of interest. Please review my request and forward Opinion to:

Neighbors and Neighbors Association
NW 79th Street CRA Grants Coordinator
5120 NW 24th Avenue
Miami, FL 33142
E-mail: 79stcorridor@nanafl.org

NW 79th Street CRA Mission Statement:

To protect and preserve the community for existing residents by enhancing their quality of life through parks, cultural initiatives, walkable neighborhoods, and housing affordability for all while driving business development and planning sustainable growth in our industrial hubs. By fostering community engagement, we aim to create a safe and thriving neighborhood that benefits current and future generations.