WEST PERRINE COMMUNITY REDEVELOPMENT AGENCY (CRA)

Business Expansion and Attraction Program Application

Business Information Business Name: ____ Business Owner's Name: Business Address: _____ Folio #: ______ FEIN: _____ Operation Hours: Number of employees: _____ Is this business currently within the CRA Boundaries (Please circle): Yes No **Contact Information** Applicant Name: _____ Work Phone: _____ Cell Phone: _____ Email: ____ **Property Owner Information** Is the applicant also the property owner: Yes/No Is the business renting the location: Yes/No Property Owner Name: Property Owner Address: _____ Property Owner Phone: _____ Property Owner Email: _____ **Business Information** Type of Business ■ Restaurant ■ Auto Store

Industrial

☐ Specialty Retail
■ Beauty Shop (Barber/Hair/Nails)
☐ Food Store
☐ Convenience Store
☐ Other (Please Specify)
How long have you been in business? Years
Business Organization Structure (Corp, LLC, etc.):
Other Partner(s)/Ownership Interest in the business:
Name of Directors/Members of the Company:
Name of Managers of the Company:
Does this company have a Board of Directors: Yes/No
If yes, please list all Officers of the Corporation and Title:
Have you ever received a CRA or a federal, state or local government Business grant before?
If yes, when and what was the grant?
Are there any open code enforcement violations at the site? Yes/No

If yes,	nere been any work done without permits? Yes/No please describe:			
	e scope of work proposed in this application be used to correct or			
finish	any existing work?			
Pleas	e explain what benefit these enhancements will provide the			
business/property, CRA and West Perrine community:				
Numk	per of jobs to be created?			
Projec	t Information			
Estimo	ated Total Project Cost:			
Amou	nt Requested:			
Work	To Be Performed (Scope of Work)			
	Interior			
	Exterior			
	Painting			
	Flooring			
	Lighting Fixtures			
	Security Enhancements			
	Remodel			
	Signage			

☐ Windows & Doors
Awnings
■ Landscaping
□ Other:
Please provide a more detailed description of work to be done for each item selected above:
Please Provide the Following as Backup to Application: (Contract is considered incomple without items as applicable below)
☐ Property Owner Signed and Notarized Affidavit if applicant is not the property owner
☐ Copy of Local Business Tax Receipt
☐ Articles of Incorporation showing the organization is Current/Active
☐ Proposed Renderings/Pictures (in color)
☐ Program Scope of Work (Attachment)
☐ Pictures of current location & adjacent properties
☐ Completed Application

Deed showing property ownership or signed documents showing bona fide intent to purchase
Signed lease of 2 years or documentation showing an intent to lease for 2 years in the \ensuremath{WPCRA}
At lease 2 years of performance activity documentation in a similar business.
Proof of payment of all utility charges on the property.
Proof of insurance
Business Owners government issued ID
Local job preference proposal outlining the number of jobs, titles, rate of pay to be created and quantifiable benefits to the community.
Proof of current property taxes
Preliminary schedule for completion of improvements
Copy of license and liability insurance for all contractors
Copy of survey if proposed scope of work includes, paving, fencing, landscape etc
Any other documentation in support of request

By signing this document, **the applicant** affirms that all of the information provided in this application is true, accurate and complete. By signing this document, the applicant agrees to use West Perrine Community

Guidelines.	
 Signature	 Date
Signatore	Daic
	pperty owner of the building, the following line must be e and/or owner of the below-cited property, give
	_ (applicant) authority to implement improvements at the
	the West Perrine CRA Beautification Expansion and
Print owner or trustee name and cap	pacity/title:
Phone:	_ Email:
Signature of owner/trustee	Date
FLORIDA MIAMI-DADE COUNTY	
or \square online notarization, this day	owledged before me by means of physical presence of of, by, on behalf of y known to me or has produced as
identification.	
(NOTARY PUBLIC SEAL)	
	Signature of Person Taking Acknowledgment
	(Printed, Typed, or Stamped Name of Notary Public)
	Title or Rank
	Serial Number, if any

Redevelopment Agency funds in accordance with the eligible business activity or activities set forth in the Business Expansion and Attraction Program Guidelines ("Guidelines"). By signing this document, the applicant

acknowledges that the applicant has read and fully understands the contents of this document and the

Terms & Conditions

Interested parties must meet with West Perrine Community Redevelopment Agency (staff to ensure eligibility. Applicants may apply through the WPCRA website: www.westperrinecra.com. A thorough review of the program guidelines and terms and conditions is required with applicant signature.

The WPCRA will make payments in the form of reimbursement issued during the duration of the project and/or after the completion of the project. Projects MUST BE pre-approved, and a program agreement executed by the WPCRA prior to commencing the project.

The WPCRA reserves the right to deny any submitted application if (a) it is determined that the application does not meet the spirit, intent and/or legal requirements for the program and/or (b) the applicant has previously defaulted on an any prior program agreement or other agreement with the WPCRA and/or County and/or (c) a prior grant awarded to the applicant was rescinded, and/or (d) the applicant is currently a party in litigation against the WPCRA and/or County.

ALL WORK MUST BE APPROVED BY THE CRA BOARD PRIOR TO ITS START TO BE ELIGIBLE FOR REIMBURSEMENT.

CHANGE IN OWNERSHIP

Program participation is not transferable to new property owners. New property owners must reapply to participate in the program. If the assisted property or business is sold during the three-year period following the completion of the project, the WPCRA or will recapture 100% of the award.

Property/business owners may not make any alterations to the funded improvements without written permission of the WPCRA or during that time.

TIME LIMITS

The term of the CRP Agreement will be one (1) year, commencing on the date of the agreement's execution by the CRA Chairman. The construction process must commence within sixty (60) days of the agreement's execution. Projects must be completed by the timetable outlined in an agreement signed between the WPCRA, business owner, and approved by the property owner in the case of a tenant.

CONSISTENCY WITH COUNTY ORDINANCES AND COMPLIANCE

Projects must comply with all Miami Dade County zoning code and building requirements. To be eligible to participate in the program, applicants must comply with all program requirements. Failure to comply with the program requirements at any time will result in the applicant being dropped from the program. The WPCRA is the sole interpreter of eligibility determinations, payment amounts and compliance with program requirements. All the

WPCRA's decisions are final. Projects are not officially accepted in the program until an agreement between the applicant and the WPCRA is signed.

APPLICATION DISCLOSURES

- Applicant will review and complete the application and submit all required backup documentation to be considered for the program.
- Applicant must make appropriate changes/corrections in the application as instructed by CRA staff.
- A completed application must be received at least four (4) weeks before the next CRA Board Meeting if there is to be a recommendation of approval.
- Applicant or representative is required to attend the meeting(s).
- Once the application has been considered for approval/denial, staff will notify applicant regarding its next steps.
- If approved, an award agreement will be negotiated between the Awardee and WPCRA, and such agreement will need to be executed prior to the Awardee starting the work.
- Awardee may be required to complete the Vendor Registration forms and a W-9 to be reimbursed.
- If the project is denied, applicant may re-apply within a year of original request.

PAYMENT PROCESS

The WPCRA will issue no more than three payments during the project. Upon completion of each phase of the project, program staff will inspect the project to ensure compliance with the approved plans and budget. Every reimbursement request must include:

- 1. An invoice with itemized expenses, from the awardee's contractor, for which reimbursement is being requested.
- 2. Front and back copies of cancelled checks.
- 3. Invoices for each payment made to contractors/vendors.
- 4. Pictures showing progression of project.
- 5. Copies of all permits, and inspection and final inspection reports or other documentation evidencing such inspections.

The WPCRA will <u>reimburse</u> the Awardee's contractor for the award amount approved by the WPCRA Board and as established in the agreement by issuing a check up to six weeks after

staff inspections and after proper documentation has been submitted for each phase of the project.

Final payment, will be issued after all work has been completed, all the above-mentioned documentation has been reviewed and accepted by the WPCRA, Certificate of Occupancy, Certificate of Use and Business Tax Receipt, where applicable, are provided and leasing and other program requirements have been met.

MONITORING PROCESS

Staff will monitor progression of the project through photo/video documentation, in addition to comments to the file.

After the project is complete, staff will monitor the business/structure for the required three to five years and will follow the monitoring steps outline in the CRA guidelines.

PUBLICITY

By accepting this award, the Awardee shall recognize the CRA as a funding source for all the activities outline in the application and award agreement. The Awardee shall ensure that any publicity, public relations, advertisements, and signs recognize the CRA for the support of all contracted activities. Awardee shall permit or shall have the landlord agree to have a sign placed on the property by the CRA in relation to this award.