# WEST PERRINE COMMUNITY REDEVELOPMENT AGENCY (CRA)

# **Commercial Grant Application**

# **Business Information** Business Name: \_\_\_\_\_ Project Address: \_\_\_\_\_ Is this project within the CRA Boundaries (Please check): Yes No **Contact Information** Applicant Name: \_\_\_\_\_ Title: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Business Owner's Name: \_\_\_\_\_ Email: **Property Owner Information** Is the applicant also the property owner (Please check): 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)						
Number of Employees						
How long have you been in business at this location? Years						
Business Organization Structure (Corp, LLC, etc.):						
Federal Tax ID Number:						
Other Partner(s)/Ownership Interest	_					
Have you ever received a CRA or a federal, state or local government B before?	Business grant					
If yes, when and what was the grant?						
Are there any open code enforcement violations?						
Has there been any work done without permits?						
If yes, please describe:	_					
Will the scope of work proposed in this application be used to correct or						
finish any existing work?						
Please explain what benefit these enhancements will provide the						
business/property, CRA and West Perrine community						
Are there active code violations on property (Please check): Yes	No					
Describe code violations (if applicable)						
Project Information						
Grant Information						
Estimated Total Project Cost:						

Grant	Amount Requested:
Work	To Be Performed (scope of work)
	Interior
	Exterior
	Painting
	Flooring
	Lighting Fixtures
	Security Enhancements
	Remodel
	Signage
	Windows & Doors
	Awnings
	Landscaping
	Other:
Please above	e provide a more detailed description of work to be done for each item selected e:

**Please Provide the Following as Backup to Application:** (Contract is considered incomplete without items as applicable below)

Property Owner Signed and Notarized Affidavit if applicant is not the property owner
Copy of Business Tax Receipt
Proposed Renderings/Pictures (in color)
Commercial Rehabilitation Program Scope of Work
Proof of current utilities
Proof of current and active State and County licensure
Pictures of current location & adjacent properties
Completed Commercial Grants Application
Proof of Property and/or Business Ownership
Proof of insurance
Government issued ID
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 Redevelopment Agency grant funds in accordance with the eligible business activity or activities set forth in the Commercial Rehabilitation Grant 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 Guidelines.

Signature		Date			
If the applicant is other than the property owner of the building, the following line must be completed. I certify that I, the trustee and/or owner of the below-cited property, give					
	(applicant) c	authority to implement improvements at the			
property as may be required u	nder the West Perri	ne CRA Commercial Grant Program.			
Print owner or trustee name an	nd capacity/title:				
Address:					
Phone:	Email:				
Signature of owner/trustee		Date			
FLORIDA MIAMI-DADE COUNTY					
or $\square$ online notarization, this $\_$	_ day of	ore me by means of <b>physical presence</b> _, by, on behalf of e or has produced as			
identification.	oridily known to the	; or rias produced as			
(NOTARY PUBLIC SEAL)					
	Si	ignature of Person Taking Acknowledgment			
	(Printed,	Typed, or Stamped Name of Notary Public)			
		Title or Rank			
		Serial Number, if any			

# **Terms & Conditions**

Interested parties must meet with West Perrine Community Redevelopment Agency (WPCRA, CRA or Grantor) staff to ensure eligibility. Applicants may apply through the WPCRA website: <a href="https://www.westperrinecra.com">www.westperrinecra.com</a>. A thorough review of the grant 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 grant 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 grant and/or (b) the applicant has previously defaulted on an any prior grant 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 or has threatened 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 Grantor will recapture 100% of the grant.

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

#### **TIME LIMITS**

The term of the CRP Agreement will be one (1) year, commencing on the date of the grant agreement's execution by the CRA Chairman. The construction process must commence within sixty (60) days of the grant agreement's execution. Projects must be completed by the timetable outlined in a grant agreement signed between the Grantor, 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 Grantor is the sole interpreter of eligibility determinations, payment amounts and compliance with program requirements. All of the

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

#### **APPLICATION DISCLOSURES**

- Applicant will review and complete the application and submit all required backup documentation to be considered for the grant.
- 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, a grant agreement will be negotiated between the Grantee and Grantor, and such agreement will need to be executed prior to the Grantee starting the work.
- Grantee 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 Grantor 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 grantee'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 Grantor will <u>reimburse</u> the Grantee's contractor for the grant amount approved by the WPCRA Board and as established in the grant 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 Grantor, 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 grant the Grantee shall recognize the CRA as a funding source for all the activities outline in the application and grant agreement. The Grantee shall ensure that any publicity, public relations, advertisements, and signs recognize the CRA for the support of all contracted activities. Grantee shall permit or shall have the landlord agree to have a sign placed on the property by the CRA in relation to this grant.