



WEST DIXIE SMALL BUSINESS TECH & INNOVATION GRANT GUIDELINES

NMCRA West Dixie Small Business Tech & Innovation Grant

The West Dixie Small Business Tech & Innovation Grant Program is designed to support small businesses on West Dixie, providing funding for technology upgrades aimed at enhancing operational efficiency and capacity. This grant program offers financial assistance of up to \$7,500 to eligible businesses for the purchase and implementation of technology-related equipment and services.

ELIGIBLE USES:

- Point of Sale (POS) Systems.
- Software Licenses and Subscriptions.
- Security Systems (including cybersecurity measures).
- Hardware Upgrades (computers, tablets, servers, etc.).
- Website Development and Optimization.
- Digital Marketing Tools and Strategies.
- Cloud Services and Data Storage Solutions.
- Training and Professional Development in Technology.
- Other technology-related expenses deemed essential for business growth.

Approval for this grant does not disqualify the business from participating in other programs offered by the NMCRA.

REQUIREMENTS

1. Must be within the NMCRA geographic boundary located on West Dixie.
2. Primary property use must be commercial.
3. Applicant must be a for-profit entity.
4. Applicable City of North Miami/county/state licenses must be up to date.
5. A photocopy of business owner's driver's license.



6. Owner/Operator or Applicant shall have no pending litigation with the City of North Miami or NMCRA or any unpaid real and/or tangible personal property taxes.
7. Applications must be completed in full, signed, and submitted to be considered. Incomplete Applications will automatically be disqualified.
8. Must be active on Sunbiz.
9. No more than one (1) location, not part of a national chain or franchise.

WEST DIXIE SMALL BUSINESS TECH & INNOVATION APPLICATION

(Please print or type – illegible and incomplete applications will not be considered)

APPLICATION CHECKLIST

Please ensure all required documents are included and initial each item.

- One original completed application with attachments.
- Provide proof that the business has been operating 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 the business name (include copy only).
- Applicable City of North Miami/county/state licenses must be up to date. Examples: City and County Business Tax receipt, Certificate of Use, etc.
- 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 the State of Florida print if not listed, submit IRS letter 147C (this includes the FEI/EIN number)
- Picture ID (Driver's License or Florida ID)
- Interior and exterior pictures of the business location.
- Letter of compliance from the Neighborhood Services Department or list of open violations*

Applicant's Initial _____

735 NE 125 St., Ste.100, North Miami, FL 33161 | P: 305.895.9839 | F: 305.895.9822 | NorthMiamiCRA.org



BUSINESS INFORMATION

Business Name: _____

Business Address: _____

Type of Business: _____

Business Organization Structure: (Please check only one of the following)

<input type="checkbox"/> Individual/sole proprietor	<input type="checkbox"/> Partnership
<input type="checkbox"/> Single-member LLC	<input type="checkbox"/> Trust/estate
<input type="checkbox"/> C Corporation	<input type="checkbox"/> Multi-Member LLC
<input type="checkbox"/> S Corporation	<input type="checkbox"/> Other: _____

Federal Tax ID Number: _____

Ownership Interest: _____

Number of Employees

How long have you been in business? _____ Years

Full time: _____

Part Time: _____

Have you ever received a NMCRA or City grant before? Yes [] No []

If yes, when and what was the grant?

Are photographs of the interior and exterior of the business attached? Yes [] No []

Do you have a letter of compliance from the Neighborhood Services Department (NSD)?

Yes [] No []

Are you willing to participate in Business Development workshops? Yes [] No []

Do you currently market your business? Yes [] No []

If yes, how do you market, please explain (ex: newspaper ads, internet, coupons)

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CONTACT INFORMATION

Business Owner's Name

Business Owner's Address

Business Phone

Cell Phone

Email Address

PROPERTY INFORMATION

Property Owner Name

Property Owner Address

Property Owner Phone

Property Owner Email Address

Do you have a current lease? Yes [] No []

If yes, how long is your lease? (Please specify if month to month) _____

How much is your monthly rent? _____

ELIGIBLE USES

- Point of Sale (POS) System
- Digital Marketing Tools & Strategies
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- Training and Professional Development in Technology
- Other technology-related expenses

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NORTH MIAMI CRA

COMMUNITY REDEVELOPMENT AGENCY

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If approved, please provide a clear explanation of how you will use the funding.

TERMS & CONDITIONS

All applicants are advised to carefully review the grant program's guidelines, terms, and conditions to determine their eligibility. Funding eligibility will be determined by the NMCRA in its sole discretion. The NMCRA reserves the right to deny any submitted application if it is determined such application does not meet the spirit, intent, and legal requirements for the grant offered. While previous participation in NMCRA or city grants is not a disqualification, preference will be given to businesses that have not received previous financial assistance from the NMCRA. Funds must be utilized for the specified purposes, and the grantee must provide receipts for all expenditures, including items purchased and services acquired, within 30 days of fund disbursement. Failure to comply with the preceding requirement or otherwise breach any grant requirements will result in the grantee being responsible for repaying the grant to the NMCRA.

PUBLICITY

By accepting this grant, the grantee shall recognize the NMCRA as a funding source for all activities outlined in the application and agreement. The grantee shall ensure that any publicity, public relations, advertisements, and signs recognize the NMCRA for the support of all contracted activities.

The applicant hereby declares and confirms that all information submitted in this application is true and accurate to the best of their knowledge.

APPLICANT SIGNATURE

Signature

Date

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