

Application No. \_\_\_\_\_



**APPLICATION FOR HISTORIC MIRAMAR  
COMMERCIAL REHABILITATION PROGRAM  
(SMALL SCALE PROJECT)**

Community & Economic Development Department  
2200 Civic Center Place  
Miramar, Florida 33025  
(954) 602-3264  
[www.ci.miramar.fl.us](http://www.ci.miramar.fl.us)



## COMMERCIAL REHABILITATION PROGRAM SMALL SCALE PROJECT

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## COMMERCIAL REHABILITATION PROGRAM SMALL SCALE PROJECT

### SECTION 1: INTRODUCTION

#### **Historic Miramar Property/Business Owner:**

The City is pleased to offer this commercial rehabilitation program to you as part of its ongoing commitment to the success of the City's most established commercial area. This opportunity is available to all owners and tenants (with owner approval) of developed commercial properties located in the Program Target Area (see map).

#### **How it works:**

Federal government money, provided directly to the City, funds this program to help commercial property owners who are located in the Program Target Area supplement the cost of improving the condition of their properties. For eligible projects (see program requirements & guidelines), the City is able to provide technical and financial assistance for the activities associated with the program.

#### **Getting started:**

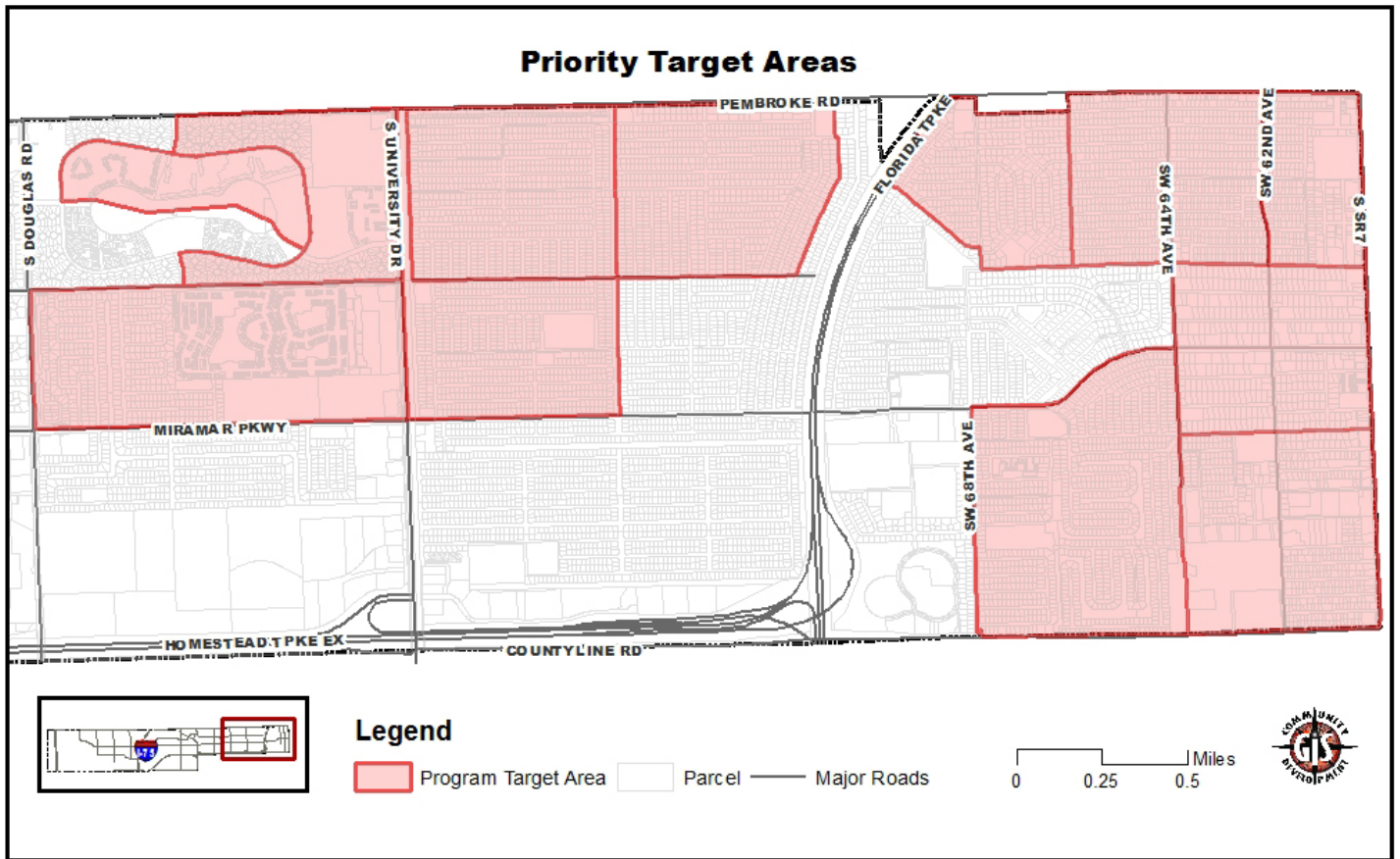
To begin, we encourage you to read the following program information to gain a fuller understanding of participation. When you are ready, please contact the City's Community & Economic Development Department at the phone number listed above to arrange an appointment with a City staff member to discuss program details and your specific needs.

Thank you for your interest and we look forward to assisting you.



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### SECTION 2: MAP OF PROJECT AREA





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### SECTION 3: PROGRAM REQUIREMENTS & GUIDELINES

#### A. Eligibility

- ❖ Location: the project must be located within the Program Target Area (*see map*).
- ❖ The owner of the property must be the applicant or provide written approval for a tenant to apply.
- ❖ Covered Improvements (*New construction does not qualify*). Per 24 CFR 570.202(a)(3), “rehabilitation of privately owned and commercial or industrial buildings is limited to improvements to the exterior of the building and correction of code violations”.

Pressure Cleaning/ Painting
Awnings: Install new or replace
Doors: Install new or replace
Signs: Install new or replace
Windows: Install new or replace
Shutters: Install new or replace

- ❖ The project must receive approval by the director of the Community & Economic Development Department before the owner or tenant applies to the City for project funding.
- ❖ The applicant must comply with all Federal Rules and Regulations, City of Miramar ordinances and Florida Building Code requirements.

#### B. Funding

- ❖ The dollar limitation for a single project is \$20,000 and applicants are required to provide matching funds as follows:

Cost of Project	Matching Funds
\$2,000 and below	10%
\$2,001 to \$10,000	15%
\$10,001 to \$20,000	20%

- ❖ The applicant’s matching funds are disbursed first; the City’s funds second.



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- ❖ Projects up to \$5,000 will be a grant. Projects over \$5,000 will be subject to a property lien for a 5 year period with a 20% write-down per year.
- ❖ A funding application must be completed by the applicant and processed and approved by the City.
- ❖ Requests for disbursement of City funds must be submitted as treatments are completed and be verified with an original invoice by the company that performed the work.
- ❖ During the term thereof and for a period of five (5) years following the date of the payments made hereunder, the City shall have the right to review and audit the related records of the applicant pertaining to any payments by the City.

### SECTION 4: SIX STEP PROCESS

#### Step 1: Project Application

##### Submittal

An appointment must be made with a city staff member in order to submit an application. At that time we discuss program details, your specific needs, and review the application for completeness. (*application fee of \$100*).

##### City Action

The Director of the Community and Economic Development Department has the sole authority to approve the project.

#### Step 2: Project Funding Application

Working with staff, the applicant completes an application for project funding. This can be done at the same time as completing step 1 and is approved before any building permit is issued through a Letter of Agreement with the City.

#### Step 3: Contractor Selection

The applicant must solicit 3 (three) bids from qualified contractors to perform the work. Staff from the Community & Economic Development Department and the applicant review the bids and award the job.

#### Step 4: Building Permit(s)

The contractor submits the applicable building permit(s) for the improvement(s). Permit fees will be waived.



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### Step 5: Improvement(s)

As work progresses, the contractor submits invoices for review and approval by the City and the applicant. The applicant's matching funds are disbursed first; the City's funds are disbursed second.

### Step 6: Project Completion/Close Out

The project will be considered completed when the contractor has obtained a final inspection by the Building Division and payment of the final invoice, indicating the applicant's approval of the work.

## SECTION 5: APPLICATION FORM

**INSTRUCTIONS:** Please print or type all information accurately and completely.

**PROJECT NAME:**

**Address:**

**Legal Description** (*attach separate sheet if necessary*):

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**Project Narrative** (*use separate sheet if necessary*)

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<b>Current Use(s) of Property:</b>		
<hr/> <hr/> <hr/> <hr/>		
<b>Proposed Use(s) of Property:</b>		
<hr/> <hr/>		
<b>PROPERTY OWNER/TENANT NAME:</b>	<b>PROPERTY OWNER/TENANT SIGNATURE:</b>	
<b>Address:</b>		
<hr/> <hr/>		
<b>Telephone:</b>	<b>Fax:</b>	<b>E-mail:</b>
<input type="checkbox"/> <b>Proof of Ownership (Submit Warranty Deed/Tax Record)</b>		
<b>NOTARIZATION</b>		
<b>STATE OF FLORIDA/COUNTY OF</b>		
The foregoing instrument was acknowledged before me this ____ day of _____, _____, by _____		
<u>(Signature of Notary Public - State of Florida)</u>		
<u>(Print, Type, or Stamp Commissioned Name of Notary Public)</u>		
Personally Known _____ OR Produced Identification _____ Type of Identification Produced _____		

**Owner Affidavit (for tenant applicant)**





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**ATTACH/SUBMIT PHOTOGRAPHS**