

# Application for Allocation of Funds

**W9 Form Must be Submitted with Application**

\_\_\_\_\_  
DATE

**For Applicant Use:**

\_\_\_\_\_  
COMMISSION DISTRICT

\_\_\_\_\_  
Legal Name of Recipient Organization or Name of County Department

\_\_\_\_\_  
Activity to be Funded

\_\_\_\_\_  
Amount Requested

\_\_\_\_\_  
Organization Address (as listed on W9 form and Corporate Documents) City, State and Zip Code

\_\_\_\_\_  
Organization Contact Person

\_\_\_\_\_  
Contact Number(s) E-mail Address

**By the acceptance of these funds, the recipient Applicant agrees to provide the services for which funds have been allocated. Signing the application affirms you have read and agree to comply with all requirements detailed on page 2 of this application.**

\_\_\_\_\_  
Recipient Organization (Organization Seal) Attest \_\_\_\_\_  
Recipient Organization Secretary

\_\_\_\_\_  
Signature of President or Vice President Type or Print Name Date

**For Commission Office Use:** Please submit form to Office of Policy and Budgetary Affairs at: [CBOFORMS@miamidade.gov](mailto:CBOFORMS@miamidade.gov)

Amount Allocated: \$ \_\_\_\_\_ Legistar or Resolution Number: \_\_\_\_\_

Memorandum Request Date: \_\_\_\_\_ BCC Meeting Date: \_\_\_\_\_  
(memorandum must be attached)

- Source:
- Discretionary Reserve
  - Office Budget Funds
  - Stroller Parking Funds
  - Arena Naming Rights Funds as defined by R-238-21
  - Marlins Settlement Funds as defined in R-226-21
  - District Designated Program

APPROVED \_\_\_\_\_  
Commissioner's Signature Date

**For Departmental Use:**

ATTEST: Miami-Dade County, Florida  
Juan Fernandez-Barquin  
Clerk of the Court and Comptroller

By: \_\_\_\_\_  
Deputy Clerk

INFORMS Supplier ID: \_\_\_\_\_

**Civil Rights:** The Organization agrees to abide by Chapter 11A of the Code of Miami-Dade County (“County Code”), as amended, which prohibits discrimination in employment, housing and public accommodations; Title VII of the Civil Rights Act of 1968, as amended, which prohibits discrimination in employment and public accommodation; the Age Discrimination Act of 1975, 42 U.S.C., as amended which prohibits discrimination in employment because of age; Section 504 of the Rehabilitation Act of 1973, 29 § U.S.C. 794, as amended, which prohibits discrimination on the basis of disability; the Americans with Disabilities Act, 42 U.S.C. § 12103 et seq., which prohibits discrimination in employment and public accommodations because of disability; the Rehabilitation Act; the Federal Transit Act, 49 U.S.C. § 1612; the Fair Housing Act, 42 U.S.C. § 3601 et. seq; and the Domestic Violence Leave Ordinance, codified as § 11A -60 et. seq. of the Miami-Dade County Code.

### **Payment Procedures**

The recipient Applicant shall submit proof of active federal tax classification by providing, as part of application, a completed W-9 form.

### **Use of Funds**

The recipient organization understands by the acceptance of these funds, it agrees to provide the services described on the application form and as approved by the Commissioner allocating the funds.

The recipient Applicant understands that allocations made from the Arena Naming Rights Funds and the Marlins Settlement Funds set specific parameters for the use of funds, detailed in Resolutions, [R-238-21](#) and [R-226-21](#), respectively.

**Prohibited Use of Funds:** The Applicant shall not utilize County funds to retain legal counsel for any action or proceeding against the County or any other of its agents, instrumentalities, employees, or officials. The Applicant shall not utilize County funds to provide legal representation, advice or counsel to any client in any action or proceeding against the County or any of its agents, instrumentalities, employees, or officials. Funding shall not be used for political donations or lobbying.

### **Audits**

**The recipient Applicant must keep on file all invoices and payment documentation associated with this agreement/application for a period of no less than five (5) years from the date of acceptance of funds.**

**Office of Commission Auditor.** Miami-Dade County has established the Office of the Commission Auditor, which is empowered to perform financial and compliance audits to determine whether financial operations are being properly conducted, whether the financial reports of the audited department, agency or entity are presented fairly, and whether the agency, department or entity has complied with the applicable requirements and regulations. Applicant agrees that the Commission Auditor may conduct audits to ensure that the Applicant has used funds appropriately and has complied with the fiscal and legislative policies of the Board of County Commissioners.

**Office of Miami-Dade Inspector General.** Miami-Dade County has established the Office of Inspector General, which is empowered to perform random audits on all County contracts throughout the duration of each agreement. Grant recipients are exempt from paying the cost of the audit, which is normally ¼ of 1% of the total agreement amount.

**Independent Private Sector Inspector General Review.** Pursuant to Miami-Dade County Administrative Order 3-20, the Applicant is aware that the County has the right to retain the services of an Independent Private Sector Inspector General (hereinafter “IPSIG”), whenever the County deems it appropriate to do so and at the County’s expense. The Applicant shall make available to the IPSIG retained by the County, all requested records and documentation pertaining to this Agreement for inspection and copying, including documents held by sub-consultants’ assignees. The County may conduct other audits or investigations, as it deems reasonable. The terms of this Section shall not impose any liability on the County by the Applicant or any third party.