



INTERNAL SERVICES DEPARTMENT
SMALL BUSINESS DEVELOPMENT
SMALL BUSINESS CERTIFICATION APPLICATION

BUSINESS OWNER'S DETAILED PERSONAL FINANCIAL STATEMENT *(Attachment A)*
PERSONAL FINANCIAL STATEMENT AFFIDAVIT *(Attachment B)*

These forms must be completed and notarized for all New Applications, Re-certification Applications and Annual Continuing Eligibility Affidavits for Small Business Certification. Attachment A must be maintained with your office records, and made available to Small Business Development ("SBD") when site visits are conducted. **Failure to comply with these requirements will result in the non-certification or immediate decertification of your business.** Attachment B must be submitted with your application.

INSTRUCTIONS ON COMPLETING THE PERSONAL FINANCIAL STATEMENT AND AFFIDAVIT

All Owners MUST Complete the Personal Financial Statement and Affidavit
Each Owner (including Married Owners) Must Provide Individual Personal Financial Statements

*******Joint Statements Are Not Acceptable*******

Please Note:

The Personal Net-Worth ("PNW") for each owner cannot exceed \$1.5 million. Your personal net-worth is a monetary figure that is calculated by subtracting your total liabilities from your total assets. When calculating your PNW, the following should be excluded:

1. Value of the business.
2. Value of your primary residence for which there is a homestead exemption.
3. All applicable retirement accounts (i.e., IRA, 401k, pension, or other official retirement account).

Each owner MUST provide information about the terms and restrictions of the retirement account(s) to SBD, and certify that the retirement account(s) is legitimate. Representations as to average gross revenues, personal net worth of owners and payroll shall be subject to audit.

If you hold any assets or liabilities jointly, you (the owner), need only include the value of your individual share.

SECTION 1: CASH ON HAND & IN BANKS

This is the total amount of your cash on hand, including funds deposited in U.S and Foreign financial institutions. This includes, but is not limited to, funds accumulated in savings accounts, checking accounts, certificates of deposit and money market accounts.

Name of Financial Institution	Account Type	Ownership %	Amount
			\$
			\$
			\$
Total Cash (Transfer to Summary Page Line 1)			\$

SECTION 2: IRA OR OTHER RETIREMENT ACCOUNTS

Individual and other retirement accounts; include any fund representing an IRA, an employer/employee funded program such as a 401K or any other retirement plan. This includes the individual and employer contributions made to the plan. ***Funds invested in an individual retirement account ("IRA"), 401k, pension, or other official retirement account will be excluded from assets by SBD with the submission of the terms and restrictions of the account(s) to SBD.***

Name of Company or Institution Holder	Current Value
	\$
	\$
	\$
Total Retirement Accounts (Transfer to Summary Page Line 2)	
	\$

SECTION 3: LIFE INSURANCE - CASH SURRENDER VALUE

The CASH SURRENDER VALUE of any life insurance policies you own. Indicate any loans against these policies.

Name of Insurance Company	Surrender Value	Loan Amount
	\$	\$
	\$	\$
	\$	\$
a. Total Surrender Value (Transfer to Summary Page Line 3)		a. \$
b. Total Loans Outstanding (Transfer to Summary Page Line 13)		b. \$

SECTION 4: STOCKS, BONDS, AND OTHER SECURITIES

The value of your stocks, bonds, securities, and any other investments not covered in previous sections.

Name of Trustee or Brokerage Account	Ownership %	Market Value
		\$
		\$
		\$
Total Stocks, Bonds, & Securities (Transfer to Summary Page Line 4)		\$

SECTION 5: CURRENT FAIR MARKET VALUE OF ALL OTHER BUSINESS OWNERSHIP(S)

You must declare the current fair market value(s) of your interest in all other businesses owned. Use the most recent financial statement to determine the value of your ownership interest(s).

(i.e. Assets – Liabilities = Current Fair Market Value)

NAME OF BUSINESS (Exclude Applicant Business)	Ownership %	Market Value
1.		\$
2.		\$
3.		\$
Total Value of Ownership (Transfer to Summary Page Line 5)		\$

SECTION 6: REAL ESTATE

DO NOT LIST YOUR PRIMARY RESIDENCE OR ANY MORTGAGE OR OTHER LOAN(S) AGAINST YOUR PRIMARY RESIDENCE. List all other property at current market value. This includes, but is not limited to, rental homes, condominiums, beach homes, and second homes as investments, personal property leased or rented for business purposes, farm properties or any other income producing land or property. List all mortgages against these real properties. (Use additional sheet, as necessary. Identify all lending institutions on a separate sheet)

ADDRESS (Include City and State)	TYPE OF USE	OWNERSHIP %	MARKET VALUE	MORTGAGE BALANCE
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
Total Real Estate (Transfer to Summary Page Line 6)			\$	\$
Mortgage Loan(s) (Transfer to Summary Page Line 14)			\$	\$

SECTION 7: PERSONAL VEHICLES

List all personal autos, trucks, boats, and recreational vehicles owned at current market value. Include personally owned vehicles leased or rented to businesses or other individuals. Include any loan balances against these personal vehicles.

YEAR AND DESCRIPTION	OWNERSHIP %	CURRENT VALUE	NOTE BALANCE
		\$	\$
		\$	\$
		\$	\$
a. Total Value (Transfer to Summary Page Line 7)		a. \$	b. \$
b. Total Loan Balance (Transfer to Summary Page Line 12)			

SECTION 8: OTHER PERSONAL PROPERTY

YOU MUST DECLARE ALL OTHER PERSONAL PROPERTY, which includes, but is not limited to, household goods, computers, electronic equipment, jewelry, antiques and collectibles, etc. at their current market value. You must retain your compilation list, but you need only provide the total below. Calculate only the value of your share of ownership. For example, if the total value is \$100, and your share is one-half, you would list \$50 as the Total.

DESCRIPTION	AMOUNT
	\$
	\$
Total Other Personal Property (Transfer to Summary Page Line 8)	\$

SECTION 9: OTHER ASSETS

The market value of any other assets you own that do not fit into one of the foregoing sections.

DESCRIPTION OF ASSETS	VALUE
	\$
	\$
	\$
Total Other Assets (Transfer to Summary Page Line 9)	\$



**Personal Financial Statement
ATTACHMENT A**

Name: _____

SECTION 10: ACCOUNTS PAYABLE

These include credit card debt, store accounts and other personal obligations, not associated with the applicant firm, payable by you personally. Do not include payables listed in other sections.

DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
			\$
			\$
			\$
Total Accounts Payable (Transfer to Summary Page Line 10)			\$

SECTION 11: NOTES PAYABLE

Include the current balance(s) of any personal loan(s) not reflected elsewhere in this document and any other personal debt guaranteed by your signature. Shareholder loans must be in the form of a written agreement, with defined interest and a repayment schedule. DO NOT INCLUDE BUSINESS RELATED NOTES FOR WHICH YOU ARE, IN ANY WAY, PERSONALLY RESPONSIBLE.

DESCRIPTION OF LOAN	AMOUNT
	\$
	\$
	\$
Total Notes Payable (Transfer to Summary Page Line 11)	

SECTION 12 UNPAID TAXES

Include your portion of any current obligation for unpaid taxes, i.e. Federal, State, or County property assessments. WE MAY REQUEST EVIDENCE OF THIS OBLIGATION.

DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
			\$
			\$
Total Unpaid Taxes (Transfer to Summary Page Line 15)			\$

SECTION 13: OTHER LIABILITIES

Include your share of any liability not previously accounted for in this statement. DO NOT LIST ANY CONTINGENT OR DEFERRED LIABILITIES. DO NOT LIST ANY APPLICANT BUSINESS LIABILITIES.

DESCRIPTION	AMOUNT
	\$
	\$
Total Other Liabilities (Transfer to Summary Page Line 16)	



PERSONAL FINANCIAL STATEMENT SUMMARY PAGE Attachment A
SMALL BUSINESS CERTIFICATION PROGRAM

PERSONAL NET WORTH OF _____
 (PRINTED NAME OF INDIVIDUAL)

AS OF: _____
 (DATE)

ASSETS

DOLLAR VALUE

1. Cash	(Total Section 1)	\$ _____
2. Retirement Accounts	(Total Section 2)	_____
<i>(SBD will deduct if the terms and restrictions of the account(s) are submitted)</i>		
3. Life Insurance	(Total Section 3)	_____
4. Stocks, Bonds, and Other Securities	(Total Section 4)	_____
5. Fair Market Value of All Business(s)	(Total Section 5)	_____
6. Real Estate	(Total Section 6)	_____
7. Personal Vehicles	(Total Section 7)	_____
8. Other Personal Property	(Total Section 8)	_____
9. Other Assets	(Total Section 9)	_____
TOTAL ASSETS		\$ _____

LIABILITIES

DOLLAR VALUE

10. Accounts Payable	(Total Section 10)	\$ _____
11. Notes Payable	(Total Section 11)	_____
12. Notes on Personal Vehicles	(Total Section 7)	_____
13. Loans against Life Insurance	(Total Section 3)	_____
14. Real Estate Mortgage(s)	(Total Section 6)	_____
15. Unpaid Taxes	(Total Section 12)	_____
16. Other Liabilities	(Total Section 13)	_____
TOTAL LIABILITIES		\$ _____

NET WORTH (Total Assets, Minus Total Liabilities) \$ _____



PERSONAL NET WORTH AFFIDAVIT

(Attachment B)

THIS FORM MUST BE SUBMITTED WITH THE APPLICATION

NAME OF FIRM: _____ DATE: _____
(PRINT NAME)

NAME OF OWNER: _____ OWNERSHIP % _____
(PRINT NAME)

ASSETS

DOLLAR VALUE

TOTAL ASSETS

\$ _____

LIABILITIES

DOLLAR VALUE

TOTAL LIABILITIES

\$ _____

NET WORTH (Total Assets minus Total Liabilities)

\$ _____

I UNDERSTAND THAT SMALL BUSINESS DEVELOPMENT, A DIVISION OF THE INTERNAL SERVICES DEPARTMENT OF MIAMI-DADE COUNTY, RESERVES THE RIGHT TO CONDUCT INVESTIGATIONS AND REQUEST ADDITIONAL INFORMATION NECESSARY TO VERIFY THE STATEMENTS AND INFORMATION PROVIDED. A SITE VISIT MAY BE CONDUCTED AT MY BUSINESS LOCATION. THE DETAILED PERSONAL FINANCIAL STATEMENT MUST BE MAINTAINED AT MY BUSINESS LOCATION AT ALL TIMES, AND AVAILABLE FOR REVIEW. FAILURE TO PRODUCE THE DETAILED PERSONAL FINANCIAL STATEMENT SHALL RESULT IN NONAPPROVAL OF MY SMALL BUSINESS CERTIFICATION APPLICATION, OR THE IMMEDIATE DECERTIFICATION OF MY BUSINESS.

STATE OF FLORIDA:

: Ss.

COUNTY OF DADE:

BEFORE ME, an officer duly authorized to administer oaths and take

Acknowledgement personally appeared _____, who being

first duly sworn deposes and affirms that the provided information statements are true and

Correct to the best of his/her knowledge information and belief.

Signature

SWORN TO and subscribe before me this _____ day of _____, 201__

NOTARY PUBLIC

State of Florida at Large

My Commission Expires: