



City of North Miami Beach, Florida

Driveway Approach Assistance Program Application

Public Works Department 17050 NE 19th Avenue North Miami Beach FL 33162

A. Applicant Information

Name: _____
First Middle Last

Address: _____
Street City State Zip Code

Primary Phone: _____ Secondary Phone: _____

Email: _____

Are you a veteran?	Yes	No
Are you Disabled	Yes	No
Are you over 65 years old?	Yes	No
Are you a full-time student?	Yes	No
Are you the owner of the property?	Yes	No
Are you the main occupant in this property?	Yes	No

B. Household Composition List all members who live in your home. Use separate sheet for additional people.

Name	Relationship	Employed?
1)		Yes - No
2)		Yes - No
3)		Yes - No
4)		Yes - No
5)		Yes - No
6)		Yes - No
7)		Yes - No

Total Household Annual Income: \$ _____

Income Eligibility Acceptable Documentation: Copy of Pay Stubs (from previous employer), Aid to Families with Dependent Children (AFDC) or Temporary Assistance to Needy Families (TANF) Official Printout/letter, Food Stamp Official Printout/letter, Letter confirming amount of unemployment benefits received, proof of child support or alimony, proof of SSA/SSI or Veteran's Benefits, or proof of retirement income. **MUST ATTACH A COPY OF DOCUMENTS – NO EXCEPTIONS.**

C. Driveway

Number of existing driveways _____ Length & width of approach (ft.) _____ / _____

Driveway Pavement Type _____

(Rock, Concrete, Asphalt, Non-existent)

Please describe the needs or repair of your driveway approach?

D. Justification

Please describe the need for this assistance.

E. Signature

I authorize any person, organization or company listed on this application to furnish you all information concerning to verify my personal records, including wages, pensions, and investments. It is understood that this authorization is granted for the sole purpose of certifying my eligibility for federal financial assistance, and that all information acquired in this regard will remain confidential.

In consideration for assistance, I agree to abide by the rules and regulations of the Driveway Approach Assistance Program (DAAP), which rules may be changed, withdrawn, added or interpreted at any time, at the City of North Miami Beach sole option and without prior notice to me.

BY MY SIGNATURE, I ACKNOWLEDGE THAT ALL INFORMATION I HAVE PROVIDED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I AM AWARE THAT IF I MAKE ANY WILLFUL FALSE STATEMENT IN THIS CERTIFICATION OR ANY OTHER DOCUMENTATION THAT I PROVIDE FOR PROGRAM ELIGIBILITY, I MAY BE PUNISHED WITH FINES OR IMPRISONMENT OF UP TO FIVE (5) YEARS, OR BOTH, UNDER SECTION 1001 OF TITLE 18, UNITED STATES CODE, AND I ALSO MAY BE SUBJECT TO CIVIL AND/OR ADMINISTRATIVE PENALTIES AND SANCTIONS.

Name (Printed) _____

Applicant Signature

Date