

Teresa Miller

From: shivo Duval-Dukes <extendedcaretransportation@aol.com>
Sent: Friday, April 1, 2022 5:41 PM
To: Grants Administration Division *JDM*
Subject: Grant application
Attachments: Grant application.pdf

Some people who received this message don't often get email from extendedcaretransportation@aol.com. [Learn why this is important](#)

SECURITY WARNING: This email originated outside of the City of Fort Pierce systems. Please use caution when clicking links or opening attachments. For questions or concerns please contact IT immediately. .

Please see all attached documents

Complete the Checklist below and submit it with your
1-Page Grant application.

2022
Small Business Technical Assistance and Grant Opportunity

II. APPLICATION CHECKLIST

Use this checklist to ensure to help ensure your application is complete.

Check (✓):

- You have read the Grant Guidelines carefully and have complied with each provision.
- Your application is dated.
- You either typed the application, or you printed legibly.
- The person listed as the "Contact Person" on the application is knowledgeable about the grant application and is aware that they are listed as the "Contact Person".
- You listed reliable telephone numbers and email addresses.
- You included the correct mailing address for correspondence and grant payments.
- You have rounded your grant funding request to the nearest dollar.
- Your application includes this essential information:
 - Description of what you would like to purchase with the grant funds.
 - Explanation of why you feel the purchase will help your business.
- The following items **MUST** be included with your grant application:
 - A copy of your current City of Fort Pierce Business Tax Receipt;
 - A copy of proof that your business is correctly registered through the State of Florida;
 - A statement from business owner that the small business includes five or fewer employees – this includes part time employees;
 - A statement from business owner that the business is NOT under a nuisance abatement investigation and/or Code Enforcement action;
 - At least ONE estimate for the item(s) you wish to purchase with a grant.
Please Note: Your estimate **MUST** be provided on a contractor's letterhead, marked as "Estimate", or on a printout from internet website, catalog, etc.;
 - If you are looking at adding signage, new paint, a grease trap, or other improvements to a structure that you are renting for your business, **be sure** to provide a letter from the owner of the property stating that you have permission to do so; and
 - A copy of the business plan that contains containing the goals of the business, the methods for attaining those goals, and the time frame for the achievement of the goals. It also describes the nature of the business, background

information on the organization, the organization's financial projections, and the strategies it intends to implement to achieve the state targets.

- The Grant Application is signed by the owner of the business.

III. INFORMATION FOR THE APPLICANT

Grant Description: This competitive grant opportunity provides CDBG money for the purchase of equipment, signage, or other improvements that will increase the small business' capacity and sustainability.

Eligible Applicants: Owners of existing small businesses with 5 or fewer employees (including part time employees). Nonprofit Organizations may attend the workshops but are NOT eligible to apply for this grant. This grant is not available for new business startups.

Funding Source: United States Department of Housing and Urban Development (HUD) Community Development Block Grant (CDBG) dollars.

Amount of Grant Awards:

- Grants for up to \$5,000 will be awarded. Requests for over \$5,000 will be automatically disqualified.
- **First come – first qualified – first served. Funding is limited. Only a limited amount of funding has been allocated for this opportunity.**

For Help Completing Your Grant Application:

Contact: Grants Administration Division City of Fort Pierce,
Telephone: 772-467-3161; Email: grantsadministration@cityoffortpierce.com.

IV. ELIGIBLE GRANT PURCHASES

Grants will be made to purchase items that will increase the capacity and/or sustainability of your business. Examples include, but are not limited to: tools, signage, window treatments, grease traps, parking lot improvements, paint, and/or landscaping.

V. INELIGIBLE GRANT PURCHASES

Ineligible purchases include, but are NOT limited to: salaries, rent, utilities, internet, telephone service, business inventory, taxes, postage or debt. Grants will NOT be awarded for these types of projects. Grants will NOT be awarded to non-profit organizations.

VII. PROJECT SELECTION AND APPROVAL PROCESS

The maximum grant request is \$5,000. Requests over \$5,000 will be automatically disqualified.

In order to qualify to apply for grant funding:

- The small **EXISTING** business must have 5 or **FEWER** employees (this includes part time).

2021-2022 SMALL BUSINESS TECHNICAL ASSISTANCE AND GRANT APPLICATION



3/31/2022

ABOUT YOUR BUSINESS:

Business Name: Extended Care Non Medical transportation Service LLC

Physical Address: 2912 Zora Neal Drive Fort Pierce FL 34947

Mailing Address: 2912 Zora Neal Drive Fort pierce FL 34947

Website Address: _____

Contact Person: Shivon Duval-Dukes Title: owner

Best Contact Telephone Number # 772-409-4231

Grant Amount Requested: \$ 5,000

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Business Owner Signature: S Duval-Dukes

Printed Name of Business Owner: Shivon Duval-Dukes

Owner Telephone Number: 772-475-1862 Email: Extendedcaretransportation@aol.com

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1. Please describe what would you like to purchase with the grant funds. _____

wheelchair lift

2. Please explain why you feel this purchase will help your business. Installing a

wheelchair lift can be a significant investment to my business. This will improve safety and efficiency in the work place. Lift will transport anyone with mobility challenges.

3. The following items **MUST** be included with your grant application:

- a. A copy of a current City of Fort Pierce Business Tax Receipt for the Business Name listed above;
- b. A printout from Sunbiz.org that shows that your business is correctly registered with the Florida Division of Corporations.
- c. At least ONE estimate for the Item(s) you wish to purchase with a grant. You may include the costs associated with permitting in your estimate.
Please Note: Your estimate **MUST** be provided on a contractor's letterhead, marked as "Estimate", or on a printout from internet website, catalog, etc.;
- d. Statement from business owner that the small business includes five or fewer employees – this includes part time employees;
- e. Statement from business owner that the business is NOT under a nuisance abatement investigation and/or Code Enforcement action; and
- f. Written Permission from the Property Owner - if you are applying for funding to update signage, paint, grease trap or other improvements to a structure that you are renting for your business.

Extended Care Non Medical Transportation Service LLC
business includes five or fewer employees- This excludes
part time employees.

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Shivon Duval-Dukes

3/31/22



City of Fort Pierce BUSINESS TAX RECEIPT

Please post in a conspicuous place or keep on person.

Business Name / Mailing Address:	Owner:
EXTENDED CARE NON MEDICAL TRANSPORTATION SERVICE LLC 2912 ZORA NEALE DR FT PIERCE FL 34947	EXTENDED CARE NON MEDICAL

Parcel ID/Business Location*: 2405-504-0009-000/9, 2912 ZORA NEALE DR

***This business tax receipt is valid at this location only.**

Date Issued	Expiration Date	Control Number
September 23, 2021	September 30, 2022	0049508

The business stated above may be engaged in the following business, profession or occupation at the location above-described.		
BTR #	Classification	Restrictions
22-00032421	TAXI/AUTO FOR HIRE-10 OR LESS PASSENGERS	NON MEDICAL TRANSPORTATION SERVICE

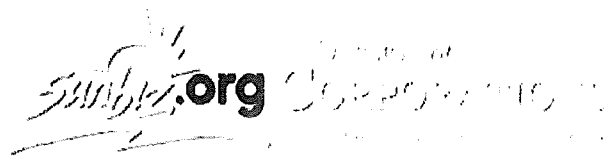
Tax Amount	\$63.51
New/Renewal Fee	\$5.00
Penalty	\$0.00
Total	\$68.51

Linda W. Cox, City Clerk (SEAL)



THIS IS A RECEIPT FOR TAX PAID AND IS NOT REGULATORY IN NATURE. This receipt does not warrant that the receipt holder is competent to perform in the business, but that the holder has paid the required tax and provided the necessary documentation (if required) for this business. Valid only when all state and local regulated trade licenses/competency cards are valid for the current fiscal year as required by law. This receipt becomes null and void if business name, classification, ownership or address is changed.





Department of State / Division of Corporations / Search Records / Search by Entity Name /

Detail by Entity Name

Florida Limited Liability Company
EXTENDED CARE NON MEDICAL TRANSPORTATION SERVICE LLC

Filing Information

Document Number	L19000246599
FEI/EIN Number	84-4592573
Date Filed	10/01/2019
State	FL
Status	ACTIVE

Principal Address

2912 ZORA NEALE DRIVE
FORT PIERCE, FL 34947

Mailing Address

2912 ZORA NEALE DRIVE
FORT PIERCE, FL 34947

Registered Agent Name & Address

DUVAL-DUKES, SHIVON M
2912 ZORA NEALE DRIVE
FORT PIERCE, FL 34947

Authorized Person(s) Detail

Name & Address

Title MGR

DUVAL-DUKES, SHIVON M
2912 ZORA NEALE DRIVE
FORT PIERCE, FL 34947

Annual Reports

Report Year	Filed Date
2020	06/28/2020
2021	04/23/2021

Document Images

04/23/2021 -- ANNUAL REPORT	View image in PDF format
06/28/2020 -- ANNUAL REPORT	View image in PDF format

[10/01/2019 -- Florida Limited Liability](#)

[View Image in PDF format](#)

Business plan-Extended Care Non- Medical transportation Service LLC

The company

Extended care non- medical transportation service is an established transportation business that offers safe and reliable senior, wheelchair and stretcher transportation throughout Treasure Coast, Florida extended care non- medical transportation service offers senior transportation, handicapped transportation and stretcher transportation for our clients with limited mobility and get where you need to be, when you need to be there.

Company background

Member: Shivon Duval-Dukes is the founder of Extended care NMT service LLC who holds many certification.to run a successful Transportation business.

Business sector

The company currently operates in the following industry: Transportation

The ownership

The company is structured as a limited liability company LLC

The management

The company will be managed by Shivon Duval-Dukes.

The goals and objectives

Our goal is to continue to be the best in transport and customers to and from their appointments in a timely manner. To provide excellent customer service and safety to our claimants. Extended care aims to accomplish the following goals and expand our areas of transporting; to increase the total revenue of approximately 35% in the next year or so. I plan to do so by continuing to train my staff. Purchase more vehicles. Continue to provide excellent customer service.

The service

Extended care transportation service LLC has a strict policy with providing timely transportation to our claimants we make our claimants feel as if they are riding with family, we extend our care.

Established customers

we have established claimants who have used our transportation company for two or more years

Extended Care Non Medical Transportation Service
LLC is NOT under a nuisance abatement
investigation and/or code Enforcement action.

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3/31/22

9:06

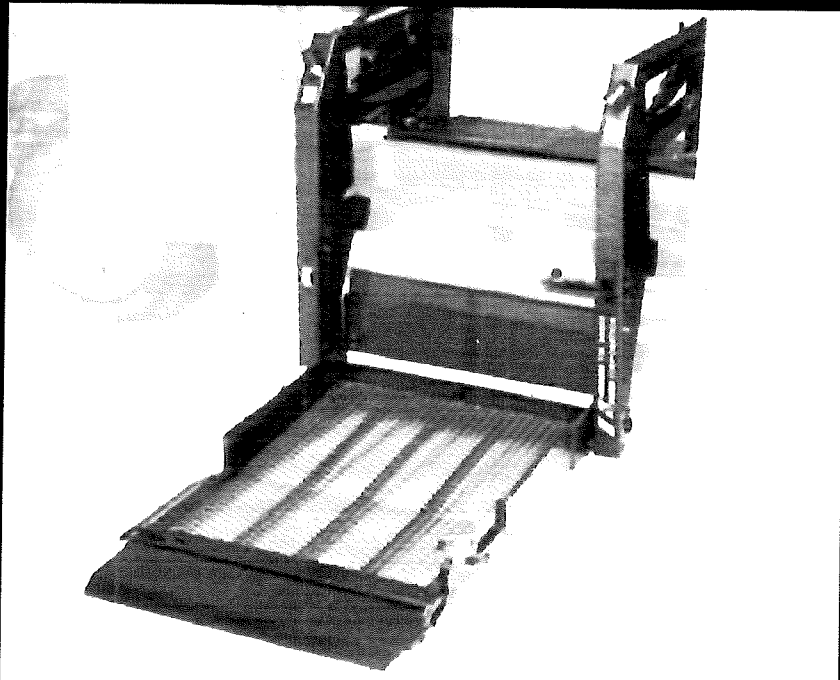


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30%



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\$7,999.99 ~~\$9,999.99~~



