



Plantation
the grass is greener®

City of Plantation LOCAL BUSINESS TAX CERTIFICATE APPLICATION

Application does not guarantee issuance of an local business tax certificate. All businesses must be located in an appropriate zoning district. Code compliance is required and all necessary inspections must be completed prior to issuance of a certificate and all required documentation must be submitted.

BUSINESS/PROFESSIONAL NAME: _____

BUSINESS ADDRESS: _____ SUITE # _____

Plantation, Florida _____ (zip code) BUSINESS PHONE : _____ FAX : _____

CELL PHONE: _____ EMAIL ADDRESS: _____

BUSINESS OPERATED FROM: MAILBOX ___ OFFICE ___ KIOSK ___ SPECIAL ___ RENT ___ OWN ___

NO. OF EMPLOYEES _____ NO. OF SQ. FT. OF LEASED AREA _____

DISTRICT: GATEWAY _____ MIDTOWN _____ TECH PARK _____ OTHER _____

CORPORATE NAME: _____

MAILING ADDRESS: _____

DESCRIBE BUSINESS _____

_____ IS THIS A CHANGE OF LOCAL ADDRESS (YES) (NO)

IF YES, GIVE OLD ADDRESS _____

IS THIS A CHANGE OF OWNERSHIP (YES) (NO) IS THIS A CHANGE OF NAME (YES) (NO)

CHECK ONE: CORPORATION ___ PARTNERSHIP ___ PROFESSIONAL ___ SOLE PROPRIETOR ___

LIST ALL OFFICERS OF CORPORATION OR PARTNERSHIP. INCLUDE NAME, HOME ADDRESS, TITLE AND OF EACH OFFICER OR PARTNER. (Attach additional sheets, if necessary.)

TITLE	NAME	HOME ADDRESS (Street/City/State/ZC)	HOME PHONE

NOTE: A PRINCIPAL OF THE CORPORATION OR BUSINESS, OR REPRESENTATIVE, MUST SIGN THIS APPLICATION AND PROVIDE A VALID DRIVER'S LICENSE NUMBER

NAME AND TITLE OF APPLICANT (Print) _____

APPLICANT'S SIGNATURE _____

Account #
Name

Date