



**Application for
 Local Business Tax Receipt**

Business Location Information	Type of application, check all that apply: <input type="checkbox"/> New, Annual <input type="checkbox"/> New, Temporary <input type="checkbox"/> Name Change <input type="checkbox"/> Location Change (within Plantation) <input type="checkbox"/> Owner Change <input type="checkbox"/> Mailing or Contact Update <input type="checkbox"/> Exempt Status <input type="checkbox"/> Other			Business operated from: <input type="checkbox"/> Home* <input type="checkbox"/> Office <input type="checkbox"/> Virtual Office <input type="checkbox"/> Mailbox <input type="checkbox"/> Store Front <input type="checkbox"/> Kiosk <input type="checkbox"/> Other		City Use OC
	Does this business have vending or ATM machines? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, vendor name	Business structure: <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Professional <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Other		Number of people working within this business location?		
	Is this address within an existing business? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, account # OC	Does this address have an open building permit? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, permit #		Sq. ft. occupied?		
	Fictitious Name					
Billing	Corporate Name					
	Name of Licensed Professional					
	Address				Suite #	
	Zip	Phone		Fax		
	Email			Web Site		
	Days and Hours of Operation					
	Name					
Owner	<input type="checkbox"/> Use business address	Address			Suite #	
		City	State	Zip		
	Phone		Email			
Acknowledgement	Application does not guarantee issuance of a local business tax receipt. Compliance with all current City Code, including zoning, is required. All necessary inspections and documentation must be completed prior to issuance of a local business tax receipt. All businesses or professionals requiring a federal, state and/or county license or certificate must provide a copy. This document will become void if the business certificate is not active within sixty (60) days of application processing. A copy of this application will be sent to the Police Department. I swear or affirm that the information given with this application is true to the best of my knowledge and belief.					
	Applicant Name		Title			
	Applicant Signature		Date			
	*Home Based Businesses must also submit Agreement for License and Inspection of Local Business Tax Receipt at Residential Address.					
City Use	Class Number	Related Record	Attachments <input type="checkbox"/> LOI <input type="checkbox"/> DL <input type="checkbox"/> Prof. Lic. <input type="checkbox"/> Home Agreement <input type="checkbox"/> Corp. Docs <input type="checkbox"/> HOA Letter <input type="checkbox"/> Mailbox Contract <input type="checkbox"/> Other		Processed by	