



**OFFICE HOURS:**  
**MONDAY-FRIDAY**  
**8 A.M. – 4 P.M.**  
**(386) 671-8140**

## Business Tax Receipt Application

### City of Daytona Beach

301 S. Ridgewood Ave, Daytona Beach, FL 32114

**PLEASE TYPE OR PRINT CLEARLY**

DATE STAMP

BTR YEAR:  
 OCTOBER 1- SEPTEMBER 30

**CHECK THE FOLLOWING WHICH APPLIES:**

NEW/Commercial   
  \*NEW/Home Occupation   
  Rental

TRANSFER:   
  Name   
  Location   
  Ownership

Transferred From: \_\_\_\_\_

**\*I acknowledge receipt of Home Occupation Restrictions.**  
 \_\_\_\_\_  
 (Initial)

1. Business Name/DBA \_\_\_\_\_
2. Phone # (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Fax # (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Email Address \_\_\_\_\_
3. Address of Business \_\_\_\_\_
4. Mailing Address if Different \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ ZIP \_\_\_\_\_
5. Type of Business \_\_\_\_\_  
(Describe in *DETAIL* the operation/profession at this location)
6. Business Owner \_\_\_\_\_ Alternate Phone # (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_
7. Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ ZIP \_\_\_\_\_
8. **Additional Requirements:** Federal I.D. # \_\_\_\_\_ Or SS # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 State License # \_\_\_\_\_ Expiration \_\_\_\_\_  
 State License # \_\_\_\_\_ Expiration \_\_\_\_\_  
 Sunbiz Registration # \_\_\_\_\_ Expiration \_\_\_\_\_
- Retail merchants declare opening value of stock in trade, and merchandise on hand, including consigned merchandise \$ \_\_\_\_\_
- Do you own the Business property?   
  YES   
  NO \*If NO, provide lease agreement (Commercial)
9. Will you be adding or changing any signs on the outside of the property?  
 YES   
 NO   
 \*If YES, permit is required from Permits & Licensing Division.
10. **Note:** Zoning must approve this application prior to issuance of the Tax Receipt. Filing this application for a city license does NOT allow applicant to operate or engage in any type of business until the city issues a Business Tax Receipt. Any person, firm or corporation who engages in any occupation, business or profession without a Business Tax Receipt may be punished in accordance with Sec. 90-342 of the City Code of Ordinances. Utility services shall NOT be connected until application is approved by Zoning.
11. The Business describe above   
 **Will**   
 **Will NOT** be operated as an adult bookstore and/or adult theatre as defined in Sec.11.3.A.7.a City Land Development Code.
12. Signature of Applicant \_\_\_\_\_ Title of Applicant \_\_\_\_\_

### OFFICE USE ONLY

Zoning District \_\_\_\_\_ Zoning Approval \_\_\_\_\_

Redevelopment   
 Downtown   
 Main St   
 Midtown   
 Zoning Denied \_\_\_\_\_  
 Ballough Rd   
 S. Atlantic   
 NA

BTR # \_\_\_\_\_ Units # \_\_\_\_\_ Rooms \_\_\_\_\_ Seats \_\_\_\_\_ Quantity \_\_\_\_\_

**Hold For:**

<input type="checkbox"/> State License _____	<input type="checkbox"/> CO Inspection Permit# _____	Type _____ Fee _____
<input type="checkbox"/> Inspection Fee _____	<input type="checkbox"/> Other _____	Type _____ Fee _____
		Type _____ Fee _____