

BUSINESS TAX RECEIPT APPLICATION
 City of Dunedin, Florida ♦ Community Development Department
 1415 Pinehurst Road, Unit F ♦ Dunedin, FL 34698 ♦ 727-298-3210 ♦ www.dunedingov.com

APPLICANT INFORMATION			
Applicant's Full Name:		Home Address:	
Driver's License No.:		Date of Birth:	Social Security No:
Phone Number:		Email:	
Do you qualify for a fee exemption pursuant to State law? Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, complete an APPLICATION FOR LOCAL BUSINESS TAX RECEIPT EXEMPTION and provide proof as required by law.)			

BUSINESS INFORMATION			
Business Name:		Federal ID No.:	
Business Address:		Mailing Address:	
Description of Business:			
Business Type: [Check one] <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company (LLC) <input type="checkbox"/> Partnership <input type="checkbox"/> Other _____			
Fictitious Name Registration? [Check one] Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, provide proof of registration as required by F.S. § 205.023.)			
Total Square Footage ("SF") of Premises / Unit: [Check one] <input type="checkbox"/> <5,000SF <input type="checkbox"/> 5,000-9,999SF <input type="checkbox"/> 10,000SF or more			
Total Number of Workers ("NOW"): [Check one] <input type="checkbox"/> 1-5 <input type="checkbox"/> 6-9 <input type="checkbox"/> 10-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200 or more			
Total Number of Vehicles ("VEH"): [Check one] <input type="checkbox"/> 1-5 <input type="checkbox"/> 6-9 <input type="checkbox"/> 10-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200 or more			
Total Number of Seats ("SEATS"): [Check one] <input type="checkbox"/> 1-10 <input type="checkbox"/> 11-25 <input type="checkbox"/> 26-50 <input type="checkbox"/> 51-100 <input type="checkbox"/> 101-200 <input type="checkbox"/> 201 or more			
Total Amount of Inventory ("INV"): \$_____ (\$3.00 per \$1,000 or fraction thereof)			

Background Information: Has the applicant, if an individual, or any of the co-owners, if the applicant is not an individual, been convicted of any felony involving fraud, deceit or offense involving moral turpitude, unless such conviction occurred at least three years prior to the date of the application; or been convicted of any offense involving sexual misconduct with minors, force or violence, keeping or residing in a house of ill fame, solicitation of a lewd or unlawful act, prostitution or pandering, unless such conviction has occurred at least three years prior to the application for a BTR, and the applicant has had no subsequent conviction? **Yes** **No** (If you answer "yes" to this question, you must provide an explanation. You must also supply documentation stating the current status of any proceedings.) [Sec. 70-78](#)

Applicant's Affirmation: I, the undersigned, do hereby certify that the information given in this application is complete and accurate, and I understand that to make false statements within this application may result in denial of application and possible legal action. If granted a Business Tax Receipt (BTR), I agree to operate within all applicable City and State laws, and to notify the City if any of the information I have given changes. I further understand that no portion of the Business Tax is refundable, and in the event of non-compliance this application and the BTR shall be subject to revocation.

Applicant's Signature	Printed Name	Date
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OFFICE USE ONLY				
BUSINESS TAX RECEIPT INFORMATION	APPROVALS	INITIALS / DATE	FEES	AMOUNT
BTR NO.:	ZONING:		ADMINISTRATIVE FEE:	
CONTROL NO.:	BUILDING:		NUMBER OF WORKERS (NOW):	
RECEIPT NO.:	FIRE:		SQUARE FOOTAGE (SF):	
CLASSIFICATION / CODE:	OTHER:		NUMBER OF VEHICLES (VEH):	
CLASSIFICATION / CODE:			NUMBER OF SEATS (SEATS):	
CLASSIFICATION / CODE:			INVENTORY (INV):	
CLASSIFICATION / CODE:			FLAT BTR FEE(S):	
CLASSIFICATION / CODE:			FIRE INSPECTION FEE:	
CLASSIFICATION / CODE:			PENALTY:	
REMARKS:			MULTIMODAL IMPACT FEE:	
			TOTAL DUE:	