



**Business Tax Receipt Application
City of Daytona Beach**

301 S. Ridgewood Ave., Daytona Beach, FL 32114
Please type or print clearly

OFFICE HOURS:
Monday – Friday
8 a.m. – 4 p.m.
(386) 671-8280

DATE STAMP
BTR Year:
October 1 -September 30

CHECK THE FOLLOWING WHICH APPLIES:

*** I acknowledge receipt of
Home Occupation Restrictions.**

___ New Commercial ___ New/Home Occupation

(Initials)

Transfer: ___ Name Change ___ Location ___ Ownership

Transferred from: _____ **Current BTR No.** _____

1. Business Name: _____
2. Phone #: _____ Email Address: _____
3. Address of Business: _____
4. Mailing Address if different: _____
5. Type of business: _____
6. Describe in detail the services/operation/ profession being requested: _____

7. Business Owner: _____ Additional Phone # _____
8. **Additional Requirements:** Federal ID# _____ or Last 4 of SS# _____
State License # _____ Expiration _____
State License # _____ Expiration _____

Please include a copy of the Sunbiz information for the business reflecting "active" status.

Retail merchants: declare opening value of stock in trade, merchandise on hand, including consigned merchandise \$ _____

Do you own the Business property? ___ yes ___ no ***If no, provide Notarized Authorization of Owner**

9. Will you be adding or changing signs on the outside of the property? ___ yes ___ no
***If yes, a permit is required from Permits & Licensing**

10. The Business described above ___ **WILL** ___ **WILL NOT** be operated as an Adult Use(s) (including sales or display of adult merchandise) as described and defined in Sec. 5.2.B.14 and 11.3.A.7.a City Land Development Code. **Sec. 5.2.B.14.b strictly prohibits Adult Uses in Redevelopment Areas.**

Note: 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. Zoning approval of this application is required prior to issuance of the 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.

Signature of Applicant: _____ **Title:** _____

OFFICE USE ONLY

Zoning District _____ Approved Denied
 Redevelopment: Downtown Main St Midtown
 Ballough Rd S. Atlantic

BTR# _____ Units# _____ Rooms _____ Seats _____ Quantity _____