



**City of South Pasadena - Business Tax Department**  
 6940 Hibiscus Avenue South, South Pasadena, FL 33707  
 Phone (727)-343-4192 Fax (727)-381-4819

**Business Tax Receipt Application**

Account: \_\_\_\_\_  
 Date: \_\_\_\_\_

MAILING INFORMATION

Business: \_\_\_\_\_  
 Attention: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City State, Zip: \_\_\_\_\_

Due and Payable by October 1<sup>st</sup>.  
**Amount Due**      \$ \_\_\_\_\_

Make Payment to:  
**City of South Pasadena**  
 6940 Hibiscus Avenue South  
 South Pasadena, FL 33707

Please correct any inaccurate information then sign and date on back side and return this form with payment.

BUSINESS CONTACT INFORMATION

Business Name: \_\_\_\_\_ Bus phone: \_\_\_\_\_  
 Owner/Contact: \_\_\_\_\_ E-mail \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City State, Zip: \_\_\_\_\_

Is business incorporated?	Yes	No
Is business a LLC?	Yes	No
Fictitious name?	Yes	No
Over the age of 65?	Yes	No
Individual?	Yes	No

TAX INFORMATION

Federal Employer ID# \_\_\_\_\_  
**OR** Social Security # \_\_\_\_\_ SS# REQUIRED per Florida Statute 205.0535 unless you have a FEI # \_\_\_\_\_

Description of business activity \_\_\_\_\_

Sales Tax # \_\_\_\_\_ Fictitious Name Certificate # \_\_\_\_\_

Pursuant to Section 205.023(2) of the Florida Statutes, business operating under any name other than the person's legal name (DBA) must obtain a current fictitious name registration from the Divisions of Corporations of the Florida Department of State and provide the City proof of such registration prior to the issuance of a Local Business Tax Receipt.

**Statement of Exemption from the Fictitious Name Act:** Exemptions are limited to these reasons, per Florida Statute 865.09. This statement is a requirement of Florida Statute 205.023(2) as a prerequisite to receiving a business tax certificate. If you do not qualify for one of these four exemptions, you must have or obtain a current fictitious name registration issues by the Florida Div. of Corporations. ([www.sunbiz.org](http://www.sunbiz.org) OR (850)-245-6058)  
**Checking the appropriate exemption certifies that compliance with the Fictitious Name Acts IS NOT REQUIRED because:**

\_\_\_\_\_ I am using only my own name

\_\_\_\_\_ I am an attorney and will practice law in Florida

\_\_\_\_\_ I am certified with the Florida Department of Business and Professional Regulation to practice this activity

\_\_\_\_\_ The application is for a corporation which has a certificate of authority to transact business in the State of Florida pursuant to chapter 607, the "Florida Business Corporation Act," or chapter 617, the "Florida Not for Profit Corporation Act"

## CHAPTER 146 BUSINESS TAX RECEIPTS

§ 146-2 (A) No person shall locate a business or main office or branch thereof within the City limits, unless a City business tax receipt shall be procured from the Department of Community Improvement. (B) Upon application and evidence submitted by the holder of a county business tax receipt or business tax receipt issued by any other municipality, the business tax receipt shall be entitled to registration in the city upon the payment of \$10.00

§ 146-7 (A) All local business taxes shall be due and payable on October 1 of each year and shall expire on the 30<sup>th</sup> day of September of the succeeding year. These local business taxes not renewed by October 1 shall be considered delinquent and subject to a delinquency penalty of 10% for the month of October, plus an additional 5% penalty each month thereafter until paid. However, the total delinquency penalty shall not exceed 25% of the local business tax fee for the delinquent establishment.

§ 146-9 (A) Every person doing business in the city, where the amount of the local business tax to be paid is dependent upon the value of stock, shall file a sworn statement, on or before October 1 of each year, setting forth the amount of average annual inventory of stock on hand, stock in storage and stock held on consignments, such average inventory to be based upon the average inventories for the preceding 12 months. (B) Every person doing business in the city where the amount of the local business tax to be paid is dependent upon the number of employees shall file a sworn statement on or before October 1 of each year setting forth the average daily employment for the preceding 12 months. (C) **If the sworn statement required herein is not filed on or before October 1 of each year, there shall be added to the local business tax a sum equal to 25% of the required local business tax as penalty. In the event that no sworn statement is filed as required herein, the city by, its inspectors, may enter into the place of business and assess the value of stock, and this determination shall be final.**

### INVENTORY AND EMPLOYEES

**Indicate numbers (where applicable): # of full AND part time employees: \_\_\_\_\_**

One owner is included in the fee; \$26.25, plus \$3.15 for each worker,

Professionals i.e. dentist, doctor, engineer, architect, attorney, chiropractor, optometrist, physician, podiatrist, psychologist, public accountants, veterinarians, etc. One professional \$210; each additional professional \$105

Total Inventory: \$ \_\_\_\_\_ (Under \$20,000 stock on hand is \$57.75 plus \$5.25 for each additional \$1,000)

For storage or warehouse facilities, total gross square footage: \_\_\_\_\_

(Up to 5,000 sqft. \$52.50; each additional 1,000 sqft. Or fraction thereof \$5.25)

### RENTAL PROPERTY

If you are completing this application because you own rental property, identify

the number of units rented: \_\_\_\_\_ At this address: \_\_\_\_\_

(Where only 1 unit is offered for rent, no license is required) \$5.25 per unit for up to 99 units; \$4.20 per unit for 100 or more units

If applicable, attach ALL copies of Florida Professional License(s) [i.e. Doctor or any professional listed above, Cosmetology, Massage, Realtor, Insurance, Medical, Health, Travel or Contractor]

### COIN OPERATED MACHINES

Indicate the # of Vending Machines \_\_\_\_\_ Game Machines \_\_\_\_\_ Laundry Machines \_\_\_\_\_

(\$73.50 first 10 laundry machines; \$2.62 each additional) (\$13.65 per coin or token operated machine i.e. vending, newspaper, phones)

Brief description of where each machine is being placed on the premises:

### OWNER INFORMATION

**PLEASE DATE AND SIGN THIS APPLICATION - REQUIRED**

#### **AN UNSIGNED APPLICATION IS UNABLE TO BE APPROVED.**

I hereby affirm that the information provided in this application is factual and accurate, and I further understand that intentionally furnishing false information will be cause for revocation. I shall comply with the "Code of Ordinances of the City of South Pasadena" and fully understand that the issuing of the Local Business Tax Receipt applied for is contingent upon my adhering strictly to the restrictions set forth herein.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature Printed Name \_\_\_\_\_

Staff Review \_\_\_\_\_ Approved or Rejected Date \_\_\_\_\_