

# APPLICATION FOR RENTAL HOUSING BUSINESS TAX RECEIPT



CITY OF SOUTH DAYTONA  
COMMUNITY DEVELOPMENT DEPARTMENT  
1672 S. RIDGEWOOD AVENUE  
SOUTH DAYTONA , FL 32119

(386) 322-3020  
FAX (386) 322-3029  
www.southdaytona.org

1. Address of rental property: \_\_\_\_\_

2. Tax parcel number of rental property: \_\_\_\_\_

3. Type of rental property (please check one)

a. Single-family dwelling: \_\_\_\_\_

b. Duplex: \_\_\_\_\_

c. Triplex: \_\_\_\_\_

d. Condominium \_\_\_\_\_

e. Mobile Home \_\_\_\_\_

4. Total number of rental units at this address: \_\_\_\_\_

5. Property-owner information:

a. Name: \_\_\_\_\_

b. Address: \_\_\_\_\_

c. Mailing Address: \_\_\_\_\_

d. Telephone Number: \_\_\_\_\_

e. Email Address: \_\_\_\_\_

6. Property Manager/Owner's Representative/Agent Information (if applicable):

a. Name: \_\_\_\_\_

b. Address: \_\_\_\_\_

c. Mailing Address: \_\_\_\_\_

d. Telephone Number: \_\_\_\_\_

e. Email Address: \_\_\_\_\_

**Notes:** Issuance of this Business Tax Receipt does not mean or imply that the subject property has passed inspection by the City. **The City will conduct an annual code inspection of the property.**

The license year is from October 1 through September 30.

Owner-occupied single-family homes with only one rental room are exempt from Business Tax Receipt.

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY FALSE INFORMATION GIVEN IN THIS APPLICATION MAY BE SUFFICIENT CAUSE FOR REVOCATION OF THE BUSINESS TAX RECEIPT.

Name of applicant: \_\_\_\_\_

Signature of applicant: \_\_\_\_\_

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

Office Use Only

Approved by \_\_\_\_\_

Date \_\_\_\_\_

Fee \_\_\_\_\_