

CITY OF SOUTH DAYTONA Community Development Department

Home-Based Business Tax Receipt Checklist

Pursuant to Chapter 16, Article II of the Code of Ordinances

The following requirements must be followed to obtain a Home-Based Business Tax Receipt with the City of South Daytona. These requirements may vary depending upon the type of business, location, state regulations, etc.

For submittal:
☐ Complete two-page application, including but not limited to:
 Detailed description of business activities
Applicable business details
Notarized applicant signature
☐ A copy of the owner/manager's Florida state issued photo ID.
A copy of the Fictitious Name, LLC, or Articles of Incorporation filing accepted by the <u>Divisior of Corporations (sunbiz.org)</u> .
 Note: A Fictitious Name is required when a business is not working under their incorporated name, and/or when a business is not the owner's full name exclusively (Ex: John Smith's Lawn Care requires a registered Fictitious Name).
☐ Copies of certifications and/or special licenses if required for the business, such as:
 Contractors
Insurance agencies
☐ A Notarized Authorization of Owner form (if not the property owner)
Once the application has gone through review, the applicant will be notified of corrections, approval, or denial. Upon notification of approval , the BTR may be issued once the following items have been completed:
☐ Payment of fees

<u>Note:</u> The checklist is a guide for your convenience; however, additional items may be required to process your application. If you require additional information, please call our office at 386-322-3020. Incomplete applications cannot be processed.



CITY OF SOUTH DAYTONA Community Development Department

Notarized Authorization of Property Owner

For Commercial and Home-based Business Tax Receipts

Note: Agents acting on behalf of the property owner must provide proof of agent authorization.

To whom it may concern:	
I,(Owner/Authorized Agent)	, do hereby authorize my tenant,
(Name of Tenant)	, to obtain a Business Tax Receipt
for(Business Name)	to be located at
` ,	
(Street Address)	
I further authorize(Nam	and/or their representative to
grant approval to regulatory agen-	cies or others as required to access and inspect the ure required approvals.
Signature of Property Owner/Authoriz	red Agent Date
STATE OF FLORIDA COUNTY OF VOLUSIA	
The foregoing instrument was acknow	vledged before me by means of □ physical presence or
	ay of, 20 by
(type of ID) as identificat	, who is personally known to me or who has produced tion.
	Notary Stamp
Notary Public Signature	



CITY OF SOUTH DAYTONA

Community Development Department

Home-Based Business Tax Receipt Application

Pursuant to Article II, Section 16-19.14 of the Code of Ordinances

Zoning: _____ BTR Account ID#: _____

	□New	Bus	siness Transfer of	Location (v	//I South Day	ona)		
□Bu	siness Name	Cł	hange Former Name	e:				
Note: Only comp	olete applicat	tion	ns will be processed. (ONLY VAIL	D FOR 30	DAYS.		
BUSINESS INFO	ORMATION							
Business/Organi	zation Name	;						
Business Addres	SS							
Mailing Address								
Business Phone								
Business E-mail								
BUSINESS OW	NER INFORI	MΑ	TION					
Owner or Corpor	ation Name							
Home/Corporate	Address							
Phone				E-mail				
FEIN or Social S	ecurity Numl	ber	(Required per FL Statute 205.0	535)				
Driver's License	Number				Sta	ate		
PROPERTY OW	NER (if not	ар	plicant)		<u> </u>			
Name								
Address								
Phone				E-mail				
Notarized Autho	rization of Ov	vne	er attached? ☐ Yes 〔	□ No □ N	/A			
BUSINESS DET	AIL							
Type of Busines	S							
Detailed Descrip	tion of Busin	ess	s Activity					
Office use only?	□ Yes □ No	0	Outside storage?	∕es □ No	Custom	ers on s	ite? □ Yes	□ No
Estimated Inven	tory Value	\$		Contracto	r License i	#		

or occupation shown and only at the ac of this business tax does not permit eng	for the privilege of engaging in the business, profession, ddress shown herein. I also understand that the issuance gaging in or managing any business in violation of federal, e, or order. A Business Tax Receipt may not be used or service or work. Initial:
district where residential uses are permare limited to professional, vocational, by clients, customers, or non-resident excustomers shall visit the address that	permitted as an accessory use to a dwelling unit in any mitted subject to certain restrictions. Home occupations business, trade, and personal services that do not involve imployees visiting the premises. I understand that no has been listed above for the business. I understand that wed and that this home-based Business Tax Receipt is for Initial:
and belief. If any portion is found to be immediate revocation of any Business must comply with the code of the City of in violation is punished under the code	ned herein is true and correct to the best of my knowledge false or misrepresented, such fact may be just cause for Tax Receipt issued to me. It is further understood that I South Daytona and failure to correct conditions which are e or sufficient cause for revocation of my Business Tax a business under a fictitious name, I must comply with the
Signature of Applicant	Date
Signature of Applicant STATE OF FLORIDA COUNTY OF VOLUSIA	Date
STATE OF FLORIDA COUNTY OF VOLUSIA	
STATE OF FLORIDA COUNTY OF VOLUSIA The foregoing instrument was acknowled	edged before me by means of □ physical presence or
STATE OF FLORIDA COUNTY OF VOLUSIA The foregoing instrument was acknowled online notarization, this day	edged before me by means of □ physical presence or of by
STATE OF FLORIDA COUNTY OF VOLUSIA The foregoing instrument was acknowled online notarization, this day	edged before me by means of physical presence or of by who is personally known to me or who has produced
STATE OF FLORIDA COUNTY OF VOLUSIA The foregoing instrument was acknowled online notarization, this day	edged before me by means of physical presence or of by who is personally known to me or who has produced
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STATE OF FLORIDA COUNTY OF VOLUSIA The foregoing instrument was acknowled online notarization, this day	edged before me by means of physical presence or of
STATE OF FLORIDA COUNTY OF VOLUSIA The foregoing instrument was acknowle online notarization, this day (type of ID) as identification Notary Public Signature	edged before me by means of physical presence or of, 20 by who is personally known to me or who has produced n. Notary Stamp
STATE OF FLORIDA COUNTY OF VOLUSIA The foregoing instrument was acknowle online notarization, this day (type of ID) as identification Notary Public Signature	edged before me by means of physical presence or of, 20 by who is personally known to me or who has produced n. Notary Stamp
STATE OF FLORIDA COUNTY OF VOLUSIA The foregoing instrument was acknowled online notarization, this day (type of ID) as identification Notary Public Signature Police Use Use Use Use Finance	edged before me by means of physical presence or of, 20 by who is personally known to me or who has produced n. Notary Stamp Office Use Only •
STATE OF FLORIDA COUNTY OF VOLUSIA The foregoing instrument was acknowled online notarization, this day (type of ID) as identification Notary Public Signature Police Use Copy of driver's license Own	edged before me by means of physical presence or of, 20 by who is personally known to me or who has produced n. Notary Stamp Office Use Only • tility Billing Community Development Code
STATE OF FLORIDA COUNTY OF VOLUSIA The foregoing instrument was acknowled online notarization, this day (type of ID) as identification Notary Public Signature Police Under Finance Copy of driver's license Own	edged before me by means of physical presence or of, 20 by who is personally known to me or who has produced n. Notary Stamp Office Use Only • tility Billing Community Development Code er Authorization Fictitious Name/LLC/Inc.
STATE OF FLORIDA COUNTY OF VOLUSIA The foregoing instrument was acknowled online notarization, this day	edged before me by means of physical presence or of, 20 by who is personally known to me or who has produced noted noted. Notary Stamp Office Use Only • tility Billing Community Development Code er Authorization Fictitious Name/LLC/Inc. ication complete State license/certificates Balance due:



CITY OF SOUTH DAYTONA Community Development Department

Business Resources

Volusia County Business Tax Receipts

www.volusia.org/revenue/btrinfo.htm Daytona Office: (386) 254-4635

New Smyrna Beach Office: (386) 423-3325

Florida Division of Corporations - Fictitious Name, LLC, Incorporation

www.sunbiz.org (850) 245-6000

Florida Department of Business and Professional Regulations (DBPR) - State Licensing

www.myfloridalecense.com

(850) 487-1395

Florida Department of Revenue - Florida Sales Tax

https://floridarevenue.com/taxes

(800) 352-3671

Internal Revenue Service – Federal Employee Identification Number (FEIN)

www.irs.gov

(800) 829-4933

Florida Department of Agriculture and Consumer Services – State Licensing/Permits

www.freshfromflorida.com

(800) 435-7352

Division of Plant Industry - Nursery Registration

www.freshfromflorida.com/divisions-offices/plant-industry (352) 359-4700

Florida Department of Financial Services - State Licensing, Worker's Compensation

www.myfloridacfo.com/division/agents/licensure

(850) 413-3137

Division of Alcoholic Beverages & Tobacco

www.myfloridalicense.com/dbpr/alcoholic-beverages-and-tobacco/

(850) 487-1395

Port Orange/South Daytona Chamber of Commerce

www.pschamber.com

(386) 761-1601

Small Business Development Center

www.sbdcdaytona.com

(386) 506-4723

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