TOWN OF DAVIE
6591 S.W. 45 STREET
DAVIE, FLORIDA 33314
(954)797-1112

HOME OCCUPATIONAL LICENSE APPLICATION

INSTRUCTIONS: For each Business Location in the Town of Davie, please complete an application. Once completed,return the application to the Occupational License division located at Town Hall.

APPLICANTS: COMPLETE BOTH SIDES OF APPLICATION

BUSINESS NAME: AMERICAN BOBCAT, BACKHOE & LANDSCAPING INC

BUSINESS STREET ADDRESS: 5201 SW 76 AVE DAVIE FLA ZIP 33328

BUSINESS MAILING ADDRESS: SAME AS ABOVE ZIP

BUSINESS PHONE: 954-680-5321

DESCRIBE TYPE OF BUSINESS: LAWN MAINT. & LANDSCAPING

BUSINESS IS: Corporation ✓ Sole Proprietor ___ Partnership ___

Owner/Officer (s)	Home Address	City/Zip 33328	Phone#
1. NATHAN LEWIS	5201 SW 76 AVE	DAVIE FLA	954-680-5321
2.			

Federal ID Number or Social Security Number ___

I understand that this is an application for a home occupational license in the Town of Davie and I may not conduct any business at this location until I have received the license itself. I further understand that this license upon issuance, is valid until September 30, _____, and must be renewed before October 1st.

This application for home occupational license allows mail and telephone use only,no signs or exterior storage, no on-site employees are permitted.

NATHAN LEWIS, PRES.
Print Owner or Officers Name and Title

[signature]
Signature of Owner or Officer

Office Use Only: Date 5/24/00 Category 08600 Fee EXEMPT Rec# ___ New ✓ Trans ___

License # ___ Control # ___ Zoning A-1

Council approval Required ___ Yes ___ No Zoning Approval ___ Date ___

Town Council Date ___ Approved ___ Denied ___

Tabled To ___ Approved ___ Denied ___

OCCUPATIONAL LICENSE DEPARTMENT APPROVAL ___

3/00 **OWNER SIGNATURE REQUIRED ON BACK OF APPLICATION**