TOWN OF DAVIE
TOWN COUNCIL AGENDA REPORT

TO: Mayor and Councilmembers

FROM/PHONE: David Quigley, Planning and Zoning Manager/954 797-1075

PREPARED BY: Sandy Saikley, Office Supervisor

SUBJECT: Business Tax Receipt

AFFECTED DISTRICT: 2

ITEM REQUEST: **Schedule for Council Meeting**

TITLE OF AGENDA ITEM: A Perfect Food Company LLC

REPORT IN BRIEF: Per Land Development Code 12-34 (N) Home occupations (Business Tax) are permitted for telephone and mail communication only and are subject to the regulations contained in the Town Code. In the AG, A-1 and R-1 districts, Town Council approval is required. On 09/03/09 a site inspection was done and the property was found in compliance with no outside storage or signs per Town Code.

PREVIOUS ACTIONS: n/a

CONCURRENCES: n/a

FISCAL IMPACT: not applicable

Has request been budgeted? n/a

Additional Comments:

RECOMMENDATION(S): Other - Staff finds application complete and suitable for transmittal to Town Council.

Attachment(s): Business Tax Receipt application, Letter of Intent.

TOWN OF DAVIE
BUSINESS TAX RECEIPT
6591 ORANGE DRIVE • DAVIE, FLORIDA 33314-3399
PHONE: 954.797.1112 • FAX: 954.797.1204 • WWW.DAVIE-FL.GOV

HOME BUSINESS TAX RECEIPT APPLICATION

APPLICANTS: COMPLETE BOTH SIDE OF APPLICATION

BUSINESS NAME: A PERFECT FOOD COMPANY, LLC

CORPORATION NAME: A PERFECT FOOD COMPANY, LLC

BUSINESS ADDRESS: 6920 SW 56 Court ZIP: 33314 Davie, FL

BUSINESS MAILING: 6920 SW 56 Court Davie FL ZIP: 33314

BUSINESS PHONE: 954-734-3811 CELL: 954-734-3811

DESCRIBE TYPE OF BUSINESS: Wholesale + Retail Internet Sales of Food Supplies

BUSINESS IS: CORPORATION _____ SOLE PROPRIETOR _____ PARTNERSHIP _____ LLC ✓

OWNER/OFFICER (S)	HOME ADDRESS	CITY/ZIP	PHONE
1. Damiano Pignato	6920 SW 56 Court	Davie FL 33314	954-734-3
2.			

FEDERAL ID NUMBER 20 0994127 OR SOCIAL SECURITY _____

I understand this is an application for a Business Tax Receipt in the Town of Davie. Until I have received the Business Tax Receipt, I will not conduct any business at this location. The Business Tax, upon receipt, is valid until September 30, 20 and must be renewed before each October 1st. _____ Initial

This application for Business Tax Receipt allows mail and telephone use only, no signs or exterior storage, no on-site employees are permitted.

Damiano Pignato
Print owner or officer's name and title

Signature of owner or officer

OFICE USE ONLY:
Date 9/2/09 Category 13500 Fee 134.01 "2010" Exempt _____ per Sec 13-3

New _____ Transfer _____ Name _____ Address _____ Owner _____ Transferred from _____

Tax Number _____ Control Number 30616 Location ID Number _____

Folio 50-41-34-04-0120 Zoning R-1

Council Approval Required X Yes _____ No Zoning Approval _____ Date 9/3/09

Town Council Date _____ Approved _____ Denied _____ Tabled _____

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HOME BUSINESS TAX RECEIPT APPLICATION

SECTION 12-34 (N)-DEFINITION:

Home Business Tax Receipt shall mean any use conducted entirely within a dwelling and carried on by persons residing in the dwelling unit, which is clearly incidental and secondary to the use of the dwelling for residential purposes and does not change the character thereof and in connection with which there is no display or stock in trade. The Home Business Tax Receipt shall involve phone and mail use only and shall not involve the use of any accessory building or yard space or activity outside of the main building not normally associated with residential use.

SECTION 13-23 - LOCATION OF BUSINESS TAX RECEIPT; ZONING REGULATION

(a) Each application for the Business Tax Receipt shall definitely state and set out the exact location at which business shall be operated. Before issuance of a Business Tax Receipt, verification of applicable zoning will be made. If the applicable zoning regulations do not permit the practice of such business, occupation or profession, the Business Tax Receipt will be denied. All Business Tax Receipts granted by council action by special exception, variance or by vested rights for nonconforming use, shall be so stated on the face of the license.

(b) Notwithstanding any provision to the contrary herein contained, certain businesses, professions or occupations may be conducted within a residentially zoned area (not to include R-1 or A-1, which require council approval) on a restricted basis for which a restricted Business Tax Receipt may be issued by the town. The owner of such business will secure a restricted Business Tax Receipt from the town subject to the provisions and limitations contained herein.

(c) Any person engaged in a personal profession or occupation which requires the use of his own personal residence may apply for a restricted Business Tax Receipt. Such application may list his home address as the place of business for the purpose of complying with the following conditions.

(1) No sign of any type may be posted or displayed on the premises which might serve to indicate that the premises are being used as a restricted home business use, except as required in accordance with all governmental bodies, No vehicles with any signs painted on them, which might serve to indicate that the premises are being used for restricted Business Tax Receipt use, shall be parked within the view of public right-of-way.

(2) The applicant shall not use the premises or any improvements thereon for the creation, storage, distribution, repair or sale of any of any merchandise or goods which would be visible from any location off the premises.

(3) No noise, odors, smoke or nuisance of any type shall arise from the conduct of the business here permitted or authorized.

(4) The applicant shall not cause or permit in connection with the business authorized herein any traffic that shall interfere or disrupt the flow for street use in the neighborhood.

(5) Any restricted Business Tax Receipt issued pursuant hereto may be revoked by the town council at any time upon notice and hearing for the violation of any provisions herein contained or for the violation of any ordinance of the town or law of the state pertaining to regulating or tax such business or for any other good and sufficient reason; provided, however, that this provision shall not effect the power of the court to revoke certain tax receipt where such revocation specifically provided for by ordinance. (Code 1964 8-6)

I understand the description of Home Business Tax Receipt as stated in Section 13-23, regarding Home Business Tax Receipt and the definition (12-34 N)

Applicant's Signature

9/1/09
Date

Town of Davie
6591 Orange Drive
Davie, Florida 33314
September 1, 2009

Sirs,

A Perfect Food Company, LLC requests permission to obtain a business license at 6920 SW 56 Court, Davie, FL 33314.

A Perfect Food Company is an internet sales and distribution company of wholesale and retail food supplements.

The products will be stored and shipped from our warehouse located in Pompano, Florida.

We, my wife and I, started the company years ago, at the same address, and had Davie Occupational License #05-19753. We closed the company due to personal reasons, (which are now past), and now have re-opened it.

Thank you for your consideration.

Sincerely,

Damiano Pignato, Owner
A Perfect Food Company, LLC
6920 SW 56 Court
Davie, FL 33314

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HOME BUSINESS TAX RECEIPT AFFIDAVIT

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

I understand that as long as I conduct business in the Town of Davie I must keep an active business tax receipt.

This application for home business tax receipt allows mail and telephone use only, no signs or storage, or on-site employees or clients are permitted.

All contractors must provide a copy of a lease at an alternate site for storage of equipment.

I Damiano Pignato certify that, to the best of my knowledge, all of my statements are true, correct, complete and made in good faith.

Print Owner or Officer's Name and Title Damiano Pignato, owner / President

Signature of owner or officer: _____ **Date:** 9/1/09

The foregoing was acknowledged before me this 2nd day of Sep 20 09

By, Damiano John Pignato Who is personally known to me or who has produced Florida Driver Lic, as identification and whom did/did not take an oath

NOTARY PUBLIC Adriana Ramos

COMMISSION EXPIRES: 05/28/2011

Notary Public State of Florida
Adriana Ramos
My Commission DD678936
Expires 05/28/2011

A FALSE STATEMENT ON ANY PART OF BUSINESS TAX RECEIPT MAYBE GROUND FOR REVOKING SAID DOCUMENT OR SUSPENDING THE RECEIPT AFTER IT HAS BEEN ISSUED.

_____Residency verified