

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: JOHN ROSADO

BUSINESS STREET ADDRESS: 14031 S.W. 20 ST. ZIP 33325

BUSINESS MAILING ADDRESS: 14031 S.W. 20 ST. ZIP 33325

BUSINESS PHONE: 954-284-1931

DESCRIBE TYPE OF BUSINESS: Daywell Finish

BUSINESS IS: Corporation Sole Proprietor Partnership

Owner/Officer (s)	Home Address	City/Zip	Phone#
1.	<u>14031 S.W. 20 ST.</u>	<u>DAVIE, 33325</u>	<u>954-424-1727</u>
2.	<u>JOHN ROSADO</u>		

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, 99, 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.

John Rosado
Print Owner or Officers Name and Title

[Signature]
Signature of Owner or Officer

Office Use Only: Date <u>9/16/99</u> Category <u>05806</u> Fee <u>\$39.⁸⁷</u> Rec# <u>524723</u> New <input checked="" type="checkbox"/> Trans <input type="checkbox"/>			
License # <u>99-12712</u>	Control # <u>10987</u>	Zoning <u>R-1</u>	(Oak Hill)
Council approval Required <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Zoning Approval <input type="checkbox"/>	Date <input type="checkbox"/>	
Town Council Date <input type="checkbox"/>	Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	
Tabled To <input type="checkbox"/>	Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	
TOWN CLERK APPROVAL _____			

4/98

OWNER SIGNATURE REQUIRED ON BACK OF APPLICATION

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