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: Glass Masonry Concepts Inc.

BUSINESS STREET ADDRESS: 11924 SW 44 St ZIP 33330

BUSINESS MAILING ADDRESS: 11924 SW 44 St. ZIP 33330

BUSINESS PHONE: 954-577-5775

DESCRIBE TYPE OF BUSINESS: Installation of glass block

BUSINESS IS: Corporation X Sole Proprietor____ Partnership____

Owner/Officer (s)	Home Address	City/Zip	Phone#
1. Michael Nadeau	11924 SW 44 St	Davie 33330	954-577-5775
2. Richard Nadeau	12430 Vista Isle Dr.	Sunrise 33325	954-474-8410

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, 00, 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.

Michael Nadeau / Richard Nadeau
Print Owner or Officers Name and Title

[signature] / [signature]
Signature of Owner or Officer

Office Use Only: Date 6/15/00 Category C5 8106 Fee 39.38 Rec# 822967 New ✓ Trans____

License # 00-13837 Control # 11787 Zoning R-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**