



TOWN OF DAVIE
BUSINESS TAX RECEIPT

6591 ORANGE DRIVE • DAVIE, FLORIDA 33314-3399
PHONE: 954.797.1112 • FAX: 954.797.1086 • WWW.DAVIE-FL.GOV

**BUSINESS TAX RECEIPT
CHECKLIST FOR SUBMITTALS
COMMERCIAL/INDUSTRIAL**

The following information is needed in order for your application to be submitted for review.

- A. Completed application signed and dated.
- B. In a letter describe type of business in detail.
- C. Provide tenant list and parking calculations for location.
 - *Ask landlord for this list
 - *Break down square footage (office/retail/warehouse uses)
- D. A site plan or floor plan of space may be required for further evaluation.
- E. Important: What was previous use (business) in this location?
- F. Copies of Fictitious Name Registration /Corporate Articles.
- G. Additional Documents (if applicable).
 - *Copy of State or County License
 - *Copy of Liability Insurance/ Workman's Compensation with Town of Davie as certificate holder (contractors).
 - *Alcoholic Beverage License
- H. Safety Inspection application filled out completely and notarized.
 - *We can notarize your signature with photo ID, wait to sign in front of notary
 - * Name and phone number of landlord/leasing agent
- I. A fire inspection will be done and you will be billed by the Fire Department.

If paying by check, you will need two separate checks made out to the Town of Davie.

Note: All paperwork must be legible.

During the review of this application, we may request further information needed to approve your Business Tax Receipt. This will be done in a timely manner. Any additional questions call 954-797-1112.



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BUSINESS TAX RECEIPT

INSTRUCTIONS: For each Business Location in the Town of Davie, please complete an application. Once completed, return the application to the Planning & Zoning Division located at Town Hall, Bldg. B.

APPLICANTS: COMPLETE FRONT PAGE ONLY. MUST BE LEGIBLE

BUSINESS NAME: _____

CORPORATION NAME: _____

SHOPPING CENTER/WAREHOUSE NAME: _____

BUSINESS STREET ADDRESS: _____

BUSINESS MAILING ADDRESS: _____

BUSINESS PHONE: _____ **CELL:** _____

DESCRIBE TYPE OF BUSINESS: _____

BUSINESS IS: Corporation _____ Sole Proprietor _____ Partnership _____ LLC _____

Owner/Officer(s)	Home address	City/Zip	Phone
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1. _____

2. _____

3. _____

Federal ID Number _____ **or Social Security Number** _____

Square Footage of Business At This Location: _____ **Office** _____ **Warehouse** _____

Number Of Full-Time Employees At This Location _____ **Part-Time Employees** _____

What Was Previous Use of Business Location _____

Industrial/Manufacturing Areas: Is your wastewater system Septic _____ Sewer _____

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

Initial

Print Owner or Officers Name and Title

Signature of Owner or Officer



TOWN OF DAVIE
BUSINESS TAX RECEIPT DIVISION

6591 ORANGE DRIVE • DAVIE, FLORIDA 33314-3399
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Business Tax Receipt Inspection

Permit _____

Loc ID _____

() Building () Plumbing () Mechanical () Electrical () Fire
() Fire only

(Plaza/ Building Leasing Information)

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Business Name _____ Phone _____

Business Address _____ Bay/Suite _____

Square Footage _____

Business Owner _____ Phone _____

Home Address _____

City _____ State _____ Zip _____

Owners Affidavit: **I certify that all the foregoing information is accurate and that any work will be done with proper permitting and in compliance with applicable laws regulating construction and zoning. Failure to obtain occupational license within 30 days of final inspections or before opening the business may result in additional penalties being imposed upon the undersigned.** _____

Initial

NO APPOINTMENTS CAN BE MADE FOR INSPECTIONS. SOMEONE MUST BE AT BUSINESS LOCATION BETWEEN 8:00 AM- 3:00 PM.

Print Business Owner Name

Business Owner Signature

Sworn to and subscribed before to me by _____
Who is personally known to me or produced _____
as identification, this _____ day of _____ 20____.

Notary's Signature _____

Printed Name of Notary _____



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AFFIDAVIT OF INVENTORY

Per Town of Davie Ordinance 2006-18, **any retail /wholesale business** must fill out an inventory of merchandise. Please complete the affidavit and return to the Town of Davie Business Tax Receipt Division along with applicable tax fee. Should you have any questions contact us at (954) 797-1112.

Business Name: _____

Business Address: _____

Check On	Inventory Value	Fee
_____	Inventory value up to \$100,000	\$134.01
_____	Inventory from \$100,001 to \$200,000	\$227.81
_____	Inventory from \$200,001 to \$300,000	\$294.82
_____	each add'l \$10,000 over \$300,001	\$ 33.50 + \$294.82

Inventory amount _____

Signature of Owner/ Officer and Title

Date

Dear Prospective Town of Davie Business Owner:

EACH BUSINESS MUST OBTAIN A BUSINESS TAX RECEIPT BEFORE OPENING A BUSINESS

This Document has been prepared to assist you in completing your Business Tax Receipt application.

- The Business Tax application must be signed by the owner or officer the corporation.
- The Tax fee must be paid. Fees are not refundable.
- The zoning of your property must be checked to determine if your proposed business is a permitted use for the location.
- The Building Division must determine that your place of business meets the necessary building codes.
- A fire inspection of the premises must be conducted by a Town Fire Inspector to ensure all applicable fire codes are met.

SIGNS

A permit is required prior to the placement of all signs, both permanent and temporary. The Planning and Zoning Division will assist you with signage regulations. The Town may issue a 30-day permit for banners or pennants when used for grand openings or special events.

It is prohibited to erect, locate, or maintain any sign, including, but not limited to: all flashing, fluttering or otherwise moving signs; posting, advertising or writings; trailer signs; arrows; signs attached to any structure, pole, or tree; signs or banners; any signs and writing upon a vehicle; and any sign located within a public right-of-way except as otherwise provided by the Town's sign ordinance.

BUSINESS FIRE CODES

A. OUTSIDE OF BUILDING

1. No obstructions to exit doors and paths.
2. Yard area must be clear of debris and other obstructions.
3. Rubbish or trash must be stored properly.
4. After construction, you must have regularly scheduled garbage pick-up service.
5. Outside storage of flammable materials must be protected by post, walls, fences, etc.; must be labeled as to contents and must be labeled with name of the LP gas company.
6. Fire Control Systems must be operational and free from obstructions.
7. Meter rooms must be posted with a sign: "Meter Room—No Storage Permitted".

B. PATH OF EGRESS

1. Aisles must be clear of obstructions.
2. Automatic closing doors must be in operating order and must be kept in their "closed" position.
3. Doors must swing in direction of exit travel.
4. Exit doors must be equipped with nothing more restrictive than "quick release" hardware when building is occupied.
5. Fire escapes and stairways must be clear of obstructions.
6. In stairwells with self-closing doors. The doors must be in the "closed" position.
7. Each required exit must be visibly identified with lettering not less than 6 inches high.
8. All exits signs must be illuminated by reliable light source (battery operated emergency lighting).
9. Exit discharges and vestibules must be kept clear.

C. ELECTRICAL

1. No defective electrical equipment or wiring shall be in use.
2. Wiring must be adequate for use and not overloaded.
3. In most cases, appliance cords cannot exceed six feet.
4. Only approved extension cords may be used (U/L listed):
 - Cords may not be stapled to anything.
 - Cords may not run under carpeting unprotected.
 - Cords shall be of heavier gauge than the appliance serviced.
5. Splices and ties in wiring must be in approved junction boxes.
6. Breaker and fuse boxes must be kept closed and easily accessible.
7. Circuit breakers must be taped in "on" position.

D. STRUCTURAL

1. There shall be no holes or gaps in the walls between tenants.
2. Ceiling tiles must be in place.
3. Highly combustible material shall not be used for interior finish.
4. Building must be in good state of repair.
5. Heat producing and ventilation equipment and the areas around them must be kept clean.
6. Fire sprinkler systems must be operational.

E. INTERIOR CLEANLINESS

1. Storage of more than 20 gallons of open flammable materials is prohibited unless stored in an approved metal cabinet.
2. "No smoking" signs must be installed in areas where flammable material is stored or used.
3. Bottled gas cylinders must be chained in the upright position.

F. FIRE EXTINGUISHERS

1. The minimum extinguisher size is 2A-10BC. Extinguishers purchased must have a service tag by a fire equipment company.
2. There shall be at least one extinguisher.
3. There shall be an extinguisher for every 2400 square feet or one not less than every 75 feet apart.
4. Extinguishers must be mounted less than 5 feet from the floor, be in clear view, and be easily accessible.
5. Extinguishers must be inspected annually by an approved fire equipment company and must have a certification tag.
6. They must always be in operating condition.

G. COMMERCIAL COOKING EQUIPMENT

1. Gas appliances shall have an AGA seal.
2. An in-line gas shut-off is required and shall be accessible.
3. A ventilating hood must be installed over all cooking surfaces and must be equipped with a fire extinguisher system. The hood must be vented to the outside and insulated from combustible construction. Filters must be clean.

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If the Town can be of further assistance, please do not hesitate to contact one of the departments listed below:

Administration	954-797-1030	Human Resources	954-797-1100
Administrative Services	954-797-1020	Information	954-797-1000
Building Division	954-797-1111	Planning & Zoning	954-797-1103
(Inspection Only)	954-797-1128	Police	954-693-8200
Budget & Finance	954-797-1050	Purchasing	954-797-1015
Business Tax Receipt	954-797-1112	Town Clerk	954-797-1023
Community Services	954-797-1145	Utilities (Billing)	954-797-1065
Engineering	954-797-1113	Utilities (Operations)	954-327-3742
Fire Prevention	954-797-1229		



DAVIE POLICE DEPARTMENT

1230 S. Nob Hill Road
Davie, Florida 33324
(Telephone) 954-693-8200
(Fax) 954-693-8208



BUSINESS UPDATE SURVEY CONFIDENTIAL INFORMATION

(Emergency information for use by The Town of Davie Police Department)

BUSINESS NAME: _____ DATE: _____

LOCATION: _____ HOURS _____
(Include Suite, Apartment, Bay and/or Building Number)

CITY: _____ STATE: _____ ZIP: _____

BUSINESS PHONE: _____ BUSINESS TYPE: _____

EMERGENCY CONTACTS

1. _____
Name _____ Title _____

Home Address _____ Home Phone _____

Mobile Phone _____ Pager _____ Work Phone _____

2. _____
Name _____ Title _____

Home Address _____ Home Phone _____

Mobile Phone _____ Pager _____ Work Phone _____

3. _____
Name _____ Title _____

Home Address _____ Home Phone _____

Mobile Phone _____ Pager _____ Work Phone _____

PREMISE INFORMATION

SECURITY DOG YES NO HAZARDOUS MATERIAL YES NO TYPE _____

LIGHTS ON AT NIGHT YES NO LOCATION _____

ALARM YES NO ALARM CO. NAME _____ PHONE _____

PLEASE RETURN THIS FORM WITH YOUR BUSINESS TAX RECEIPT APPLICATION