

**CITY OF PEMBROKE PINES**  
APPLICATION FOR [Check One]:

Local Business Tax Receipt  
Zoning Application

Special Permit (Non-Profits)  
Special Event

**FOR OFFICE USE ONLY**

Account No. \_\_\_\_\_

Date Paid: \_\_\_\_\_

Application No. \_\_\_\_\_

Job No. \_\_\_\_\_

DATE: \_\_\_\_\_ FEDERAL I.D. NO. \_\_\_\_\_

\*BUSINESS NAME \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_

\* NOTE: If fictitious name, registration required

CENTER/BLDG. NAME/LEGAL SUBDIVISION \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

FULL NATURE OF BUSINESS \_\_\_\_\_ No. of Employees at this Location: \_\_\_\_\_

BUSINESS E-MAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

APPLICANT NAME \_\_\_\_\_ APPLICANT PHONE \_\_\_\_\_

APPLICANT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

APPLICANT MUST BE AN OFFICER, PARTNER, OR OWNER OF BUSINESS, OCCUPATION, OR PROFESSION.

IF CORPORATION, LIST NAME, TITLE, HOME ADDRESS AND PHONE # OF ALL OFFICERS, INCLUDING REGISTERED AGENT.

IF NEW BUSINESS: Name of former business and length of time space has been vacant. (N/A if first time occupancy, sharing space, restricted, or existing business). \_\_\_\_\_

MERCHANTS: Annual Value of Wholesale Inventory \$ \_\_\_\_\_ RESTRICTED LICENSE: Where are materials stored? \_\_\_\_\_

ATTACH ALL APPLICABLE DOCUMENTATION SUCH AS: Health Permit, State Contractor License, Broward County Certificate of Competency, Certificate of Insurance, State Professional License, HRS license, proof of transfer of ownership; original City of Pembroke Pines local business tax receipt signed by current owner if transferring local business tax receipt; proof of Charitable, Non-Profit, etc. status (such as a 501(c)3).

**SIGNATURE OF APPLICANT** \_\_\_\_\_

(Please Print Completed Form & Sign)

State of Florida )  
County of Broward )

The foregoing instrument was acknowledged before me by means of \_\_\_\_\_ physical presence OR \_\_\_\_\_ online notarization this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
by \_\_\_\_\_

\_\_\_\_\_  
(Signature of Notary Public)

\_\_\_\_\_  
Printed Name of Notary Public

Personally known OR produced identification

Type of Identification Produced \_\_\_\_\_

(Below This Line For Office Use Only)

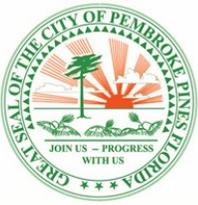
NEW BUSINESS \_\_\_\_\_ SHARING SPACE \_\_\_\_\_ DATE OF APPROVAL \_\_\_\_\_ REMARKS \_\_\_\_\_

RESTRICTED \_\_\_\_\_ EXISTING BUSINESS \_\_\_\_\_ APPROVED BY \_\_\_\_\_

SQUARE FOOTAGE \_\_\_\_\_ Group Occ. \_\_\_\_\_ Parking \_\_\_\_\_ Occ. Load \_\_\_\_\_

Type of construction \_\_\_\_\_

No. Dwelling units \_\_\_\_\_ Zoning \_\_\_\_\_



# INFORMATION SHEET

City of Pembroke Pines – Local Business Tax Receipt Division  
601 City Center Way, 4<sup>th</sup> Floor, Pembroke Pines, FL 33025  
Telephone: 954-450-1062 Fax: 954-517-8402 www.ppines.com

Every business operating in the City of Pembroke Pines will need to apply for a Local Business Tax Receipt by completing a Local Business Tax Receipt & Zoning Application Form (if operating from a commercial or leased space), **or** a Restricted Local Business Tax Receipt & Zoning Application Form (if operating business from a residence). The application must be signed by owner or corporate officer and notarized. We will provide notary service at no charge provided the form is signed in our presence and a Florida Driver's License or other U.S. picture identification is presented. Payment for Local Business Tax Fees must be submitted with the application by check (temporary checks will not be accepted), money order, cashier's check, or personal check. An application **WILL NOT BE ACCEPTED WITHOUT PAYMENT**.

1. Your business must be registered and be active with the State of Florida, Division of Corporations. You can do this at [www.sunbiz.org](http://www.sunbiz.org) or you can call the Department of State at (850) 245-6000. If you will be using a "Fictitious Name" (DBA), this must also be registered with the State of Florida, Division of Corporations, and must show the business as the owner of the name (DBA).
2. Your business must have an active Federal Tax Identification Number (also known as FEIN). To apply for your Federal Tax ID Number, contact the Internal Revenue Service at (800) 829-3676.
3. If your business is operating from a commercial or leased space, a copy of your lease must accompany your application.
4. A copy of any county or state license required for your business or service you provide must accompany your application. (See County/State Licensing Agency Information listed below.)

**\*\*Every Local Business Tax Receipt application (with the exception of the homebased business) must first be reviewed and approved by the Building and Zoning Department. The Building and Zoning Department will advise you if your business location requires any building and/or fire inspections. INSPECTIONS ARE A SEPARATE FEE AND MUST BE PAID IN ADDITION TO THE LOCAL BUSINESS TAX RECEIPT FEE. Once all the necessary inspections have been passed, your Local Business Tax Receipt will be issued and mailed to the mailing address listed on your application.\*\***

5. A **Broward County Local Business Tax Receipt** must also be obtained after the issuance of the Pembroke Pines Local Business Tax Receipt. This may be done at the Broward County Governmental Center located at 115 S. Andrews Avenue, Ft. Lauderdale, 954-357-4829 or online at [www.broward.county-taxes.com/btexpress](http://www.broward.county-taxes.com/btexpress).

## COUNTY/STATE LICENSING AGENCY INFORMATION

- **ALCOHOLIC BEVERAGE COMMISSION:** 5080 COCONUT CREEK PARKWAY, MARGATE, FL 33063 (954) 917-1350.
- **BROWARD COUNTY CERTIFICATE OF COMPETENCY BOARD:** 1 N UNIVERSITY DR., PLANTATION, FL 33324 (954) 765-4400.
- **DEPT. OF BUSINESS AND PROFESSIONAL REGULATION:** 1940 NORTH MONROE ST., TALLAHASSEE, FL 32399-1027 (850) 487-1395.
- **DEPT. OF AGRICULTURE & CONSUMER SERVICES:** TALLAHASSEE, FL (850)245-5500.
- **Food/Health Permit/Restaurant License:**  
If you own a restaurant or hotel, licensing is done through **Department of Bus. & Prof. Regulation** (850) 487-1395.  
If you own a convenience store, market, etc., health permit licensing is done by **Dept. of Agriculture** (800) 435-7352.
- **HRS – Broward County Child Care Licensing:** (Day Care Center or Family Home Daycare) (954) 357-4800.
- **Sales Tax Information – Dept. of Revenue:** 3301 N University Drive, Coral Springs, FL 33065 (954) 346-3000  
[www.myflorida.com/dor](http://www.myflorida.com/dor)