

APPLICATION FOR CHARLOTTE COUNTY BUSINESS TAX RECEIPT

Charlotte County Tax Collector 18500 MURDOCK CIR. PORT CHARLOTTE, FLORIDA 33948
Phone: (941) 743-1350

PLEASE PRINT	1.) Primary Business Activity (Please be specific):	8.) Date Business Opened in Charlotte County: Month _____ Day _____ Year _____	Acct. #	
	2.) Check Business Type: <input type="checkbox"/> Professional <input type="checkbox"/> Retail <input type="checkbox"/> Service <input type="checkbox"/> Contractor <input type="checkbox"/> Mfg. <input type="checkbox"/> Wholesale <input type="checkbox"/> Other	9.) Total Number of Employees at this location (including owners):		Receipt #
	3.) Business Name:	10.) REQUIRED BY LAW (Provide One): Federal ID Number: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
	4.) <input type="checkbox"/> Various Locations within the County	Last Four(4) of Social Security Number: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
	5.) Job Card # _____ (attach copy)	11.) Ownership Information:		
	6.) Commercial Business Location (actual address): _____ City: _____ State: ___ Zip: _____	1 st Owner: _____		
	7.) Mailing Address (if different): _____ City: _____ State: ___ Zip: _____	2 nd Owner: _____		
	Business Telephone: _____	Home Address: _____		
	Cell Phone: _____	City: _____ State: ___ Zip: _____		
	Business E-mail: _____	Phone: (_____) Driver's License Number'(s) _____ Date of Birth: _____		

12.) _____ **HANDYMAN BUSINESS TAX:** I am aware of the limitations on my work. I understand that I may not contract for, nor hold myself out as a contractor for any construction, repair, alteration, remodeling, addition or improvement on any building or structure.

13.) State License/Certification/Registration #(attach copy):	14.) Department of Revenue Sales Tax Number:
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15.) Accommodations and Vending Information (if applicable):	
Restaurants/Taverns/Bars, etc.: # of seats _____	Laundromats: # of coin machines: _____
Hotel/Motel/Bed & Breakfast/etc.: # of rooms _____	Number of vending machines: _____

16.) FICTITIOUS NAME REGISTRATION NUMBER: _____ EXPIRATION DATE _____

17.) This certifies that the above named business is exempt from registering for a Fictitious Name (check box)
<input type="checkbox"/> It is a corporation registered with the Florida Secretary of State. Document # _____
<input type="checkbox"/> I am licensed by the Department of Business and Professional Regulation or the Department of Health.
<input type="checkbox"/> It is operated under the legal name(s) of the owner(s).

18.) Exemptions per Florida Statute 205
<input type="checkbox"/> Check only one (attach a copy of proof of exemption) Must be a Charlotte County resident to qualify. If you are applying for the sixty-five exemption, you can have no more than one employee
<input type="checkbox"/> I am sixty-five (65) years old <input type="checkbox"/> Disabled Veterans <input type="checkbox"/> Charitable Organization (501c) attach copy

I UNDERSTAND THAT I AM RESPONSIBLE FOR ENSURING THAT MY BUSINESS COMPLIES WITH ZONING REGULATIONS, THE CHARLOTTE COUNTY MANDATORY RECYCLING ORDINANCE, AND ANY OTHER STATE, COUNTY OR CITY REGULATIONS.

I SWEAR THIS APPLICATION FOR BUSINESS TAX IS MADE FOR THE PROFESSION OR BUSINESS INDICATED HEREON AND IS TRUE AND CORRECT.

Signature: _____ Date: _____

Visit our website at: www.cctaxcol.com or contact us at 941-743-1350

CHARLOTTE COUNTY BUSINESS TAX RECEIPT INSTRUCTIONS

CHARLOTTE COUNTY TAX COLLECTOR
18500 MURDOCK CIRCLE
PORT CHARLOTTE, FL 33948
(941) 743-1911 OR (941) 743-1362

- 1. TYPE OF BUSINESS CONDUCTED:** Enter a description of the business activity (**BE SPECIFIC**)
- 2. TYPE OF BUSINESS:** Self explanatory.
- 3. BUSINESS NAME:** Enter your name or the name you will be doing business in. If you will be using a fictitious name, this must be applied for first @ www.sunbiz.org. (#16)
- 4. VARIOUS LOCATIONS:** Check this box if you will be doing business at different locations throughout the county. (You do not have a commercial location.) ex: handyman or lawn service
- 5. JOB CARD#:** Every commercial location must go through zoning and get a job card. (attach a copy)
- 6. COMMERCIAL BUSINESS LOCATION:** Actual physical address of the business (if you have marked #4 please enter various locations).
- 7. MAILING ADDRESS:** (if different than business location) **PLEASE BE SURE TO COMPLETE ALL PHONE NUMBER INFORMATION!**
- 8 & 9. SELF EXPLANATORY**
- 10. FEDERAL ID OR SOCIAL SECURITY NUMBER:** This is required by law.
- 11. OWNERSHIP INFORMATION:** Name of owner of business (If it is a corporation, LLC, etc. please enter the information here). 2nd owner should be corporate officer or qualifying officer. Address & phone number must also be completed (**NO PO BOX-MUST BE PHYSICAL ADDRESS**). Owners driver license number and date of birth must also be completed. (**SUBMIT A COPY OF DRIVER LICENSE**)
- 12. HANDYMAN:** Please read carefully and initial the box.
- 13. STATE LICENSE OR CERTIFICATION NUMBER:** Application will not be processed for contractors, attorneys or any other regulated professional unless a **COPY** is attached.
- 14. DEPT OF REVENUE SALES TAX NUMBER:** Please attach a copy of your certificate (if applicable).
- 15. ACCOMODATIONS & VENDING INFORMATION:** If applicable.
- 16. FICTITIOUS NAME REGISTRATION NUMBER & EXPIRATION:** The fictitious name must be registered with the state before the business tax receipt can be issued. (www.sunbiz.org) If this has been done please enter your fictitious registration number along with the expiration date.
- 17. FICTITIOUS NAME EXEMPTION:** Please check the appropriate box if exempted.
- 18. EXEMPT FROM PAYMENT:** If you qualify for one of the exemptions you must provide proof. (**PERSONS 65 OR OLDER MUST BE A RESIDENT OF THIS COUNTY AND CANNOT HAVE MORE THAN 1 EMPLOYEE**)

*****BE SURE TO READ THE FINAL STATEMENT ON THE APPLICATION, SIGN AND DATE THE FORM AND RETURN TO US WITH THE APPROPRIATE FEES. ALL INCOMPLETED APPLICATIONS WILL BE REJECTED AND RETURNED! *****

IMPORTANT CONTACT INFORMATION

Charlotte County Building Construction Services
(941) 743-1201
www.charlottecountyfl.com

Charlotte County Zoning Department
(941) 743-1964
www.charlottecountyfl.com

Florida Department of Agriculture
& Consumer Services (DACS)
(800) 435-7352
www.800helpfla.com

Florida Dept of Elder Affairs (ELDER)
(800) 963-5337
<http://elderaffairs.state.fl.us/>

Florida Dept of Financial Services (DOI)
(800) 342-2762
www.fldfs.com

Florida Dept of Environmental Protection (DEP)
(850) 245-2118
www.dep.state.fl.us

Florida Dept of Business & Professional Regulation
(DBPR)
(850) 487-1395
www.myflorida.com/dbpr

Florida Dept of Health (DOH)
850-245-4321
www.doh.state.fl.us

Florida Dept of Children and Families (DCF)
(850) 487-1111
www.myflorida.com/cf_web

Agency for Health Care Administration (AHCA)
888-419-3456
www.fdhc.state.fl.us

Florida Dept of Community Affairs (DCA)
(850) 488-8466
www.dca.state.fl.us

Florida Dept of Revenue (DOR)
(800) 352-3671
<http://sun6.dms.state.fl.us/dor>

Florida Dept of Education (DOE)
(850) 245-0505
www.fldoe.org

Florida Dept of Highway Safety & Motor
Vehicles (DHSMV)
(850) 922-9000
www.hsmv.state.fl.us



CHARLOTTE COUNTY PROPERTY APPRAISER

PAUL L. POLK, CFA

South County Annex
410 Taylor Street
Punta Gorda

18500 Murdock Circle
Port Charlotte, FL 33948-1076
Fax: (941) 743-1499

West Charlotte Annex
6868 San Casa Boulevard
Englewood

Exemptions: (941) 743-1593
records@ccappraiser.com

Real Property: (941) 743-1498
rp@ccappraiser.com

Personal Property: (941) 743-1476
tpp@ccappraiser.com

INFORMATION BULLETIN

Unless expressly exempt, Section 196.001, Florida Statutes requires the ad valorem taxation of all property located in this state, both real and personal. Application for a business tax receipt to conduct a business in Charlotte County is an indication that you are, or will be, in possession of tangible personal property that must be placed on Charlotte County's ad valorem tax roll.

Tangible personal property is all goods, chattels, and other articles of value used for commercial purposes, as cited in Section 192.001. Tangible personal property is all property other than land, buildings, and certain licensed motor vehicles utilized in your business.

One of the Property Appraiser's duties is annual valuation of tangible personal property, and it is likely that this office will contact you within the next few months concerning that requirement.

A \$25,000 exemption on tangible personal property is available if the tangible personal property tax return, which will be mailed to you in January, is filed by the following April 1.

The Tangible Personal Property Department is located in the Murdock Administration Center, Room 333, at 18500 Murdock Circle, and can be reached by telephone at (941) 743-1476. If you have any questions concerning tangible personal property, please let us hear from you.

Paul L. Polk, CFA
Cert. Gen. RZ2940
Charlotte County Property Appraiser