



City of DeBary

Department of Planning, Zoning & Development
16 Colomba Road, DeBary, Florida 32713
Phone: (386) 601 - 0238
Business Tax Receipt Application Packet

TO ALL APPLICANTS

PLEASE NOTE THAT THE CITY CAN ONLY ACCEPT CASH OR CHECKS

**** Payable when you pick up your Business Tax Receipt****

Welcome to the City of DeBary! The following is important information regarding your local business tax application. Please read it carefully before completing the attached applications and please contact us if you have any questions.

Please keep this information in a safe place for future reference.

- There is a tax due to the City based on your type of business. In addition, if a fire inspection is required, an applicable fire inspection fee will also be collected based on building square footage. The City of DeBary contracts with the City of Orange City for fire services.
- Please ensure that all forms in your application packet are filled out completely. The following information should be attached to the application when it is returned. We cannot accept any application without all of the required information.
 1. A copy of any required state license for yourself, your business, or your employees.
 2. A copy of your fictitious name registration from the Department of State and/or proof of registration of your corporation.
- It is strongly advised that businesses verify zoning regulations based upon type of business selected prior to applying for a business tax receipt. You may contact the Planning, Zoning & Development Department at 386-601-0204 for zoning questions.
- Once your application has been submitted to the Planning, Zoning & Development Department and zoning has been verified, your application will be processed. Your application may require further review by the Orange City Fire Inspector. The Fire Inspector will visit your business location (with the exception of home-based businesses) to perform an inspection. This process generally takes approximately one week.
- Business tax receipts are payable on October 1st of each year. Reminder notices are sent out in August and payment must be received by September 30th to avoid penalties. Any new business tax receipt processed after April 1st will be issued at one-half the annual fee due.
- You will be notified when your business tax receipt is ready to be picked up. Please note that it is a violation of City code to operate a business in the City of DeBary without first paying your local business taxes and obtaining a business tax receipt. Also, please note that a Volusia County Business Tax Receipt (BTR) is also required. The City issued approval number will be needed when applying for your Volusia County BTR.

Other Helpful Information

- To occupy an existing building, the new tenant must contact Fire Inspector to verify approved occupational business use prior to occupying the building. All new commercial business locations that have never been occupied will need an occupancy/interior completion permit before the building is occupied.
- For Worker's Compensation Information, call the Department of Financial Services customer service line (850-413-1609) (www.myfloridacfo.com/wc).

Small Business Information

- The Small Business Development Center (SBDC) at Daytona State College offers workforce and continuing education programs such as business workshops and seminars as well as provides business owners with access to valuable research tools and individual management assistance. The SBDC help businesses start, grow and succeed. The SBDC can be found on line at <http://sbdcdaytona.com> and contacted by phone at 386-506-4723. Seminole State College in Sanford (407-475-1200) (<http://sfdc.seminolestate.edu>) also provides small business development seminars.
- The Florida Department of Revenue issues State Sales Tax numbers. The local office is located at 1180 N. Williamson Blvd. Suite 160, Daytona Beach, FL 32114 (386-274-6600).
- Online information and filing is available at www.sunbiz.org for the following required state registrations.
 - Fictitious Name Registration (per Florida Statute Section 865.09)- Anyone conducting business and using a business name that does not fall under the State of Florida exempt guideline must register their business name. (850-245-6058)
 - All corporate registrations (850-245-6052)

State Licensing Requirements For:

- Daycares, Preschools, and Adoption agencies can be obtained through the Florida Department of Children and Families (407-846-5148). (www.myflfamilies.com)
- Restaurants, alcohol sales, and mobile/perishable food carts can be obtained through the Division of Hotel & Restaurant Commission (850-487-1395) (www.myfloridalicense.com/dbpr)
- Convenience/grocery stores, charitable organizations, health clubs, automotive repair businesses, telemarketing, pawnbrokers, travel agencies, moving companies, bakeries, delicatessens or agriculture products can be obtained through the Department of Agriculture and Consumer Services (1-800-435-7352) (www.freshfromflorida.com)
- Salons, accounting, real estate or construction industry professions can be obtained by calling the Department of Business and Professional Regulations (850-487-1395) (www.myfloridalicense.com/dbpr).
- Finance, investment, mortgage, and banking professions can be obtained by calling the office of Financial Regulations (850-487-9687) (www.flofr.com).



STAY IN COMPLIANCE WITH THE CITY'S NPDES PROGRAM: SAY NO TO ILLEGAL DUMPING and ILLICIT DISCHARGES

Illegal Dumping

Health Risks: Rodents, insects, and other vermin attracted to dump sites may pose health risks. Dump sites provide an ideal breeding ground for mosquitoes, which can multiply 100 times faster than normal in the warm stagnant water entrapped in the dump material.

Fire Hazard: The dump material may be subject to spontaneous combustion or arson, which can be causes of a fire hazard. Due to this there can also be forest fires and severe erosion, because fires bum away trees and undergrowth. This can also have a negative impact on plants and wildlife.

Flooding: When the waste dumps block the ravines, creeks, swales, ditches, culverts or drainage inlets, the hydraulic capacity of the stormwater system becomes reduced, and in many cases, can cause flooding conditions.

Water Quality Impacts: Runoff from dump sites containing chemicals may contaminate groundwater wells and surface water used as sources of drinking water.

Decrease of Property Value: Dump sites serve as magnets for additional dumping and other criminal activities. The community then becomes unattractive to commercial and residential developers.

Rise in the maintenance costs: There are significant costs to the local government associated with continuous clearing of illegally-dumped waste. These costs may be passed along to the residents in the form of higher service fees or property taxes.

Questions?

Alan Williamson

Public Works
Director

386-601-0208



Illicit Discharges

Non-Stormwater discharges to storm sewers that come from a variety of sources that include illicit connections and cross connections from industrial, commercial, and sanitary sewage sources, leaking sanitary sewage systems, malfunctioning septic systems, improper disposal of wastes such as used oil,



These discharges are "illicit" because storm sewer systems are not designed to accept, process, or discharge such wastes. Storm drainage systems are supposed to receive only the portion of precipitation, which drain from surfaces exposed to precipitation, and nothing else.

Hazards Associated with Illicit Discharges

Pathogenic and toxic pollutant sources from sanitary, commercial industrial and other sources from residential areas could cause disease upon contact or consumption. This could also cause treatment problems to downstream receiving waters when contaminated with heavy metals, illicit discharges from landscaped and organic toxicants.

Illicit discharges from landscaped irrigation runoff, construction site dewatering, automobile washing and laundry wastes could cause excessive algal growth and be a threat to aquatic life.

City Services



The City of DeBary has contracted with Waste Pro as the garbage contractor. Waste Pro is a privately-owned full service company, serving the public with a variety of environmental services including innovative recycling programs and solid waste management services. For more information, contact Waste Pro at 386-788-8890.

Other Resources:

<http://www.volusia.org/services/growth-and-resource-management/environmental-management/pollution-control/>



BUSINESS TAX RECEIPT APPLICATION

City of DeBary
16 Colomba Rd. DeBary, FL 32713 – 3264
(386) 668 - 0238

FILING THIS APPLICATION FOR LOCAL BUSINESS TAXES DOES NOT ALLOW APPLICANT TO OPERATE OR ENGAGE IN ANY TYPE OF BUSINESS UNTIL A LOCAL BUSINESS TAX RECEIPT IS ISSUED TO THE APPLICANT. ANY PERSON, FIRM OR CORPORATION WHO SHALL ENGAGE IN ANY BUSINESS, PROFESSION OR OCCUPATION WITHOUT A LOCAL BUSINESS TAX RECEIPT SHALL BE PUNISHED IN ACCORDANCE WITH THE CITY CODE.

**PLEASE COMPLETE THE FRONT & BACK OF EACH PAGE AS APPLICABLE
PLEASE TYPE OR PRINT CLEARLY**

ONLY CASH OR CHECK ACCEPTED

<p><u>CHECK THE FOLLOWING THAT APPLIES:</u></p> <p><input type="checkbox"/> UPDATE <input type="checkbox"/> ADD CLASSIFICATION <input type="checkbox"/> CHANGE CLASSIFICATION <input type="checkbox"/> RENEWAL <input type="checkbox"/> NEW COMMERCIAL/INDUSTRIAL <input type="checkbox"/> NEW HOME OFFICE (CIRCLE ONE: CLASS A / CLASS B*) CLASS B REQUIRES SPECIAL EXCEPTION APPROVAL (All Home Office Applicants are required to complete the attached Home Office Agreement)</p>	<p style="text-align: center;"><u>TRANSFER:</u></p> <p><input type="checkbox"/> NAME <input type="checkbox"/> LOCATION <input type="checkbox"/> OWNERSHIP <input type="checkbox"/> CITY APPROVAL #: _____</p>	
1. Name of Business:		
2. Owner Name:	Phone:	
3. Email Address:		
4. Business Address:		
City:	State:	Zip Code:
5. Mailing Address:		
City:	State:	Zip Code:
6. Business / Profession Description:		
7. Square Footage of Building/Tenant Space:		
8. Number of Employees:		
9. Anticipated Opening Date:		

FOR OFFICIAL USE ONLY

Parcel #:		Property Owner:			
Zoning Class:	Service ID:	<input type="checkbox"/> Business Tax	<input type="checkbox"/> Transfer	<input type="checkbox"/> Relocate	<input type="checkbox"/> Other
Planning Dept:	Date:	Fire Marshall:	Date:		
Fees					
<input type="checkbox"/> Full Year Fee (Applying between July 1 & March 31)					
<input type="checkbox"/> Half Year Fee (Applying between April 1 & June 30)					
_____ Business Tax Fee	_____ Fire Inspection Fee	_____ Late Fee	_____ Transfer Fee		
Valid Through:		Total Fee:			

BUSINESS TAX RECEIPT EXEMPTIONS

ONLY SIGN BELOW IF APPLICABLE ALONG WITH ALL NECESSARY DOCUMENTS

Fictitious Name Exemption

By affixing my name and signature below, I understand that I am affirming that my business or profession is exempt from the fictitious name registration as defined in Florida Statutes Section 205.023.

FOR THE REASON INDICATED:

- Name(s) (First & Last) of the owner(s) is/are the business name.
- Licensed Attorney forming a business for the practice of law in the State of Florida
- Registered with The Department of Business and Professional Regulation or The Department of Health and their licensing board have not imposed requirements for the registration as a fictitious name.
- Corporation, Partnership or other legal entity filed or registered and in good standing with the division of corporations and is not transacting business under any other name.

Name

Signature

Date

Business Tax Receipt Exemption

Florida Statutes 205.055, 205.162, 205.192, and 205.171 provide certain exemptions from the Business Tax Receipt fee. If applicable, please check the appropriate exemption box, **attach all required documents**, and submit forms along with the City of DeBary Business Tax Receipt Application.

- F.S. 205.162: Exemption for certain disabled persons, the aged, and widows with minor dependents
- F.S. 205.192: Charitable, etc., organizations; occasional sales, fundraising; exemption
- F.S. 205.171: Exemptions allowed disabled veterans or their un-remarried spouses
- F.S. 205.055: Taxes and Fees for Veterans and Low Income Persons
- H.B. 7087: Taxation

NOTE: In no event, under this or any other law, shall any person, veteran or otherwise, be allowed any exemption whatsoever from the payment of any amount required by law for the issuance of a Business Tax Receipt to sell intoxicating liquors or malt and vinous beverages.

Name

Signature

Date

ALL APPLICANTS MUST SIGN

CERTIFICATION:

I CERTIFY THAT ALL THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I ACKNOWLEDGE THAT A LOCAL BUSINESS TAX RECEIPT ISSUED PURSUANT TO THIS APPLICATION DOES NOT WAIVE REQUIREMENTS OF ANY CITY, COUNTY, STATE OR FEDERAL ORDINANCES, STATUTE OR REGULATION THAT I MUST MEET PRIOR TO ENTERING INTO THE BUSINESS, PROFESSION OR OCCUPATION FOR WHICH THE LOCAL BUSINESS TAX RECEIPT IS SOUGHT. I WILL COMPLY WITH ALL SUCH REQUIREMENTS, AND UNDERSTAND THAT FAILURE TO DO SO IS PUNISHABLE IN ACCORDANCE WITH CITY CODE. UNDER PENALTIES OF PURJURY, I DECLARE I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

Name

Applicant Signature

Title

Date

Please Print

Legal Authority: Florida Statute 205.0535(5) – No Business Tax Receipt shall be issued unless the Federal Employer Identification is obtained from the person(s) to be taxed.

Sole Owner/Partners/Co-Owners

Owner Name:		Phone:	
Address:			
City:	State:	Zip:	

Owner Name:		Phone:	
Address:			
City:	State:	Zip:	

Corporation/LLC/LP/P.A

Corporation Name:		Phone:	
Address:			
City:	State:	Zip:	
Federal Identification No.:			

Corporate Officers

Name:		Title:	
Home Address:		Phone:	
City:	State:	Zip:	

Name:		Title:	
Home Address:		Phone:	
City:	State:	Zip:	

Name:		Title:	
Home Address:		Phone:	
City:	State:	Zip:	

City of DeBary Independent Operator Application

Date:		
Federal Identification No.:		
Your Name: (As it appears on your State License)		
Your Mailing Address:		
City:	State:	Zip:
Email Address:		
Current place of Employment:		
Business Address:		
Business Phone:	Home/Cell Phone:	
Your Signature:		

PLEASE ATTACH A COPY OF YOUR STATE LICENSE

Home Based Businesses Only Home Office Agreement

Agreement is hereby made for City of DeBary Home Office, for the privilege of engaging in the limited home office, hereinafter described:

Business Name:		
Type of Business:		
Applicant:	Phone	
Home Office Address:		
Mailing Address:		
Property Owner(s) Name:		
Property Owner(s) Address:		
City:	State:	Zip:

Home Office by definition is the use of a portion of a residential dwelling as an office for contractors, subcontractors, consultants, computer repair, desktop publishing, professional and business office activities and the like that **do not involve clients, customers, or employee visits to the premises**, or a business that provides off-site services to homeowners or businesses that do not involve the use of tools and machinery in size or numbers beyond that customarily found in a residential dwelling unit.

Section 3-127. Home Occupations

The following regulations shall apply to home occupations:

1. Home occupations shall be categorized as follows:
 - a. Class A. Class A home occupation shall be limited to office use or arts and handicrafts only on the premises of the home occupation where there are no supplier or client business visits to the premises permitted. The only supplies and equipment accessory to the home occupation that are permitted on the premises is those common to a small business office. No stock-in-trade or commodities shall be delivered or sold upon the premises. No business activities, other than office use by the occupants of the premises, shall take place on the premises. The home occupation shall not adversely affect nearby dwellings or properties through noise, vibrations, odors, fumes, fire hazards, light glare, electrical or radio wave interference, or the like. Class A home occupations shall be allowed as permitted uses in all resource corridor, residential, mobile home and agricultural classifications.
 - b. Class B. Home occupations not included in Class A. Class B home occupations shall be allowed in agricultural classifications, when approved as a special exception. Some examples of Class B home occupations are beauty shops and barbershops, music lessons, art, handicraft, ceramics classes, lawn mower repair services and dog grooming.
2. Only persons who reside in the dwelling unit shall be employed or act as an independent contractor in said dwelling unit permitted as a Class A home occupation. Other employees or independent contractors of the Class A home occupation may be permitted; provided that said persons do not assemble upon the premises for any purpose relating to the business. For Class B home occupations, the City Council may allow, as a condition of the requisite special exception, one or more employees or independent contractors who are not residents of the dwelling unit.
3. The home occupation shall be clearly incidental and subordinate to the residential use and shall under no circumstances change the residential character of the dwelling.

4. The floor area devoted to the home occupation shall not exceed 25 percent of the floor area of the dwelling. For *Class B* home occupations, not more than 500 square feet in an attached or detached garage of a dwelling, or not more than 500 square feet in any accessory building in an agricultural classification, may be used for a home occupation in lieu of floor space within the dwelling.
5. There shall be no change in the outside appearance of the premises. No on-premises signs identifying the home occupation are permitted in conjunction with a *Class A* home occupation. *Class B* home occupations may have one non-illuminated on-premises sign, not to exceed 1 1/2 square feet in area. Any sign shall be mounted flat against the wall of the building.
6. All office equipment used in the home occupation on the premises shall be inside the dwelling or in enclosed structures and within the space limitations in subsection (4) of this section. No products shall be displayed on the premises.
7. No equipment shall be used in the home occupation which creates fire hazards, electrical interference, noise, vibration, glare, fumes or odors detectable to the normal senses off the premises. In the case of electrical interference, no equipment or process shall be used which creates visual or audible interference in any radio or television receivers off the premises, or causes fluctuations in line voltage off the premises.
8. No vehicular traffic shall be generated by the home occupation in greater volumes than would normally be generated by the dwelling unit. Notwithstanding the provisions of section 3-130(a), no more than one vehicle associated with the home occupation may be kept on the premises. Any need for parking generated by the conduct of the home occupation shall be met off the street and on the premises, but other than in the front yard.
9. The home occupation shall not adversely affect the habitability or value of the surrounding properties nor alter the essentially residential character of the neighborhood.
10. Any violation of these regulations may result in the revocation of any home occupation permit, in addition to any other remedy for such violation provided in this Code or by law.
11. The issuance of a permit to engage in a home occupation in accordance with this Code shall not be deemed to be a change of zoning nor an official expression of opinion as to the proper zoning for the particular property.

ACKNOWLEDGEMENT

I, the Undersigned, have received, read and understand all of the preceding regulations applicable to a Home Office in the City of DeBary. I hereby agree and acknowledge that violation of any of these regulations, or of any of the above special conditions, stipulations, and safeguards constitute sufficient grounds for the termination and revocation of this Home Office Agreement. I also understand that the Home Office granted shall be good only for the particular business designated in this document and only for the Undersigned Person(s) to whom the Home Office Local Business Tax Receipt was issued.

NOTARIZATION

Signature

Printed Name

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____ and who is personally known to me or who has produced _____ as identification.

Notary Stamp

Signature, Notary Public

FOR COMMERCIAL/INDUSTRIAL BUSINESSES ONLY

FIRE DEPARTMENT INSPECTION REQUIREMENTS

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY. IF THESE REQUIREMENTS ARE NOT MET, THE ISSUANCE OF YOUR LOCAL BUSINESS TAX RECEIPT MAY BE DELAYED. ADDITIONAL FEES MAY BE CHARGED IF THE FIRE MARSHAL HAS TO MAKE MORE THAN ONE INSPECTION.

- Inspections for new businesses are not conducted on vacant units. Furnishings, machinery, etc., should be in place. Electric power should be on at the unit to check the operation of exit and emergency lighting.
- State Statutes require that all buildings have address numbers posted visible from the roadway. If necessary, post address on a sign. Numbers shall be a minimum of 3" and in contrasting colors.
- Certified portable fire extinguishers must be available at the time of inspection, or the inspection will be discontinued. A home business requires a 1A10:BC; all other businesses require a 3A-40-BC. These must be certified by a licensed technician (the Fire Department does not perform this) and mounted a minimum of 4" from the ground, and a maximum height of 5'. The average travel distance for these is 75' unimpeded, accessible and visible.
- All electric breakers shall be identified and panels shall have a minimum of 36" clearance in front and 10' around. Extension cords are prohibited as a substitute for permanent wiring. Surge protectors are allowed for small accessories, not heavy appliances (refrigerators, microwaves, etc.). Multi-plug adapters are prohibited.
- Exit lights shall be illuminated (all bulbs). Emergency lights shall be tested monthly by the business for not less than 30 seconds and a record kept for the Fire Department's review.
- Exit doors shall have no more than 2 simple means of unlocking (no burglar bars). A minimum of 36" clearance is required between isles. A clear path shall be maintained concurring with the width of the exit. Stock, temporary or otherwise, shall not encroach upon egress and exits. Stock shall have a minimum 18" clearance from sprinkler heads. Fire doors shall not be "propped" open.
- A minimum one-hour separation wall shall divide occupancies. If vehicles or other hazards are stored, then a two-hour separation or more may be required.
- A qualified person shall maintain fire suppression systems. Systems shall be certified annually or more if required. These systems include, but are not limited to: spray booths, commercial cooking, and sprinklers.
- Fire alarm systems shall be maintained and certified by a qualified person. A copy of the fire alarm plan shall be kept on site. The Fire Department shall be notified if the system is out of service immediately. Alarm company service providers shall forward a copy of all maintenance, test, and inspections to the Fire Department.
- Hazardous materials shall be used and stored in accordance with manufacturer recommendations, state and local laws/ordinances. MSDS shall be provided.
- No spraying of flammable/combustible liquids without a spray room or spray booth in accordance with NFPA 33. This includes auto body products and flammable/combustible cabinet glues for woodworking shops.
- Housekeeping shall be maintained.
- Fire lanes shall be maintained and are not for receiving. Rear doors should be used for this purpose when applicable. These lanes are for fire, medical and other uses.

FOR COMMERCIAL/INDUSTRIAL BUSINESSES ONLY



Orange City Fire Department Pre-Incident Planning Worksheet

Business Name:		Phone:
Business Address:		Unit:
Business Manager:		
Business Phone:	Home/Cell Phone:	
Home Address:		
Property Owner:		
Address:	Phone:	
Square Feet**:	Building Height (Stories):	
Fire Alarm (Yes/No)	Fire Sprinkler System (Yes/No)	
Alarm Company Name:	Phone:	
List any hazardous materials (Flammable, Combustible, Gas, Toxic, Etc.):		
<hr/>		

List at least two Emergency Contacts (You may include yourself):

Name:	Phone:	Key holder (Yes/No)
Name:	Phone:	Key holder (Yes/No)

**** Fire inspection fee is based on square footage of occupant space.**