



**TOWN OF DUNDEE
LOCAL BUSINESS TAX RECEIPT APPLICATION**

☐ NEW BUSINESS

☐ CHANGE EXISTING BUSINESS

BUSINESS NAME _____

DESCRIPTION OF BUSINESS _____

SQUARE FEET (IF APPLICABLE) _____

STREET ADDRESS _____ PARCEL ID _____

MAILING ADDRESS _____

BUSINESS OWNER'S NAME _____

EMAIL ADDRESS _____

HOA APPROVAL (if applicable)

☐

YES (attach copy of approval letter)

☐

NO

FEDERAL EMPLOYEE ID# _____

OWNER'S ADDRESS _____

BUSINESS PHONE _____ AFTER HOURS CONTACT AND PHONE _____

DBPR STATE LICENSE # (IF APPLICABLE) _____

FICTITIOUS NAME REGISTRATION # (ATTACH COPY) _____

POLK COUNTY TAX RECEIPT # (ATTACH COPY) _____

USE OF HAZARDOUS MATERIALS ACCORDING TO THE FLORIDA STATUTES 422?

☐

YES

☐

NO

SIGNATURE OF APPLICANT _____ DATE _____

***TOWN USE ONLY ***

_____ PLANNER	☐ APPROVED	☐ DISAPPROVED	ZONING DISTRICT _____
_____ FIRE MARSHALL	☐ APPROVED	☐ DISAPPROVED	CODE ENFORCEMENT _____
_____ BUILDING OFFICIAL	☐ APPROVED	☐ DISAPPROVED	

REASONS FOR DISAPPROVAL _____