



CITY OF MIRAMAR

An Equal Opportunity Employer

Mayor

Wayne M. Messam

Vice Mayor

Yvette Colbourne

City Commission

Winston F. Barnes

Maxwell B. Chambers

Alexandra P. Davis

City Manager

Dr. Roy Virgin

**"We're at the
Center of Everything"**

City of Miramar
C/O Business Tax Office
2300 Civic Center Place
Miramar, FL 33025
www.miramarfl.gov

Phone (954) 602-3040
Phone (954) 602-3061
Fax (954) 602-3470
Fax (954) 602-4498

Email: businesstax@miramarfl.gov

Re: Business Tax Receipt Commercial Application (Building/Plaza Owners)

Dear Sir or Madam:

Any person wishing to engage in or manage any business, profession or occupation within the City, including home based businesses, is required by City ordinance to get a City Business Tax Receipt.

Step 1: Complete the enclosed 3-page application and return it with the requirements listed below. (Please note: All tenants are responsible for obtaining a City of Miramar Business Tax Receipt.) **If your location has a leasing office onsite; you must first complete the Certificate of Use process in the City of Miramar's Community and Economic Development Department; Building Division.**

Business Tax Requirements:

1. Photocopy of the applicant's driver license. (Contact Person)
2. Photocopy of the State of Florida Articles of Incorporation OR Photocopy of the State of Florida Fictitious Name Registration.
3. Photocopy of the Settlement Statement, or Warranty Deed. (Deed or Bill of Sale must be recorded with the Broward County)
4. Photocopy of the Employer Identification Number (EIN) on the form from the IRS.
5. Photocopy of the General Liability Insurance Certificate. (Must be on the Acord Form and must list the Miramar Address)
6. Photocopy of the Waste Pro Contract Agreement.
7. **A non-refundable application fee of \$25.00.** The license fee is due once your application is approved. (** License fees may change based on your final fire inspection **)

Please return in person or mail with all requirements to:

City of Miramar
Business Tax Office
2300 Civic Center Place
Miramar FL 33025

Business Tax Receipt Commercial Application Building Owners Continued

Please complete the classification factors that apply to your business. Indicate the number of employees **including** you and any family member working.

of Employees _____ / _____ # of Rooms _____ # of Units _____ # of Floors _____
(FT/PT) (Hotel/Motel Only) (Apts/Condos Only)

of Buildings _____ Guard Gates () Yes () No # of Units _____ # of Persons _____
(Multi-Residential) (Storage Facilities Only) (Church/Assembly Occupancies)

of Barbers _____ # of Operators _____ # of Agents _____
(Beauty/Nail Salon) (Real Estate/Insurance)

of Persons _____ # of Students _____
(ALF/Group Home/Other Res Based Facility) (Schools & Child Care Facility)

Restaurants: () Eat-In () Take-Out () Drive-Thru () Out Door Seating () Yes () No

Restaurants: Seating Capacity _____ Hood System If yes, how many? _____

of coin operated machines: Games _____ Vending _____ Music _____

Washers _____ Dryers _____ Pool Table(s) _____ Food/Candy _____ Soda _____

of Trucks/Vehicles _____ # of Fuel Hoses _____ Drive-Thru Car Wash _____
(Parked overnight at Miramar Location) (Gasoline Stations Only)

Square Footage _____ () Fire Alarm () Sprinkler System () Elevators () Spray Booth
(Must have Square Footage)

Do you have Hazardous Chemicals/Materials store at your Miramar location? _____

Do you have a generator at your Miramar location? _____

Business Tax Receipt Commercial Application Building Owners Continued

STATE OF FLORIDA
COUNTY OF _____

NOTARIZED SIGNATURE OF APPLICANT

Sworn to and subscribed before me this _____ day of _____ 20____.
Personally appeared: _____

Personally Known _____ OR Produced Identification _____

Type of Identification Produced _____

(SIGNATURE OF NOTARY)

(SEAL)

If your license has been denied or if there is dispute as to your business classification you have the right to appeal the decision of the City, first to the City Manager and then, if necessary, to the City Commission in accordance with Chapter 11-35, Miramar City Code.

FOR BUSINESS TAX OFFICE USE ONLY:

Approved: _____

Denied: (State Reason) _____

Designee

Date