



TO ALL APPLICANTS

Building
386-775-5423

City Clerk
386-775-5403

City Manager
386-775-5408

Community Info.
386-775-5410

Finance
386-775-5430

Fire
386-775-5460

Human Resources
386-775-5457

Parks & Rec.
386-775-5454

Planning
386-775-5415

Police
386-775-9999

Public Works
386-775-5453

Utilities Billing
386-775-5444

Welcome to the City of Orange City! Following is important information regarding your local business tax application. Please read it carefully before completing and feel free to call us if you have any questions. You may wish to keep this information in a safe place for future reference.

◆ Please ensure that all of the forms in your application packet are filled out completely. The following information should be attached to the application when it is returned:

- A copy of any required state license for yourself, your business, or your employees.
- A copy of your fictitious name registration from the Department of State and/or proof of registration of your corporation. Sunbiz.org

We will not accept any applications without all of the required information.

◆ Once your application has been returned to the City Clerk's Office, it will be reviewed by the Planning Department and the Fire Marshall will visit your business location to perform an inspection excluding a home based business. This process generally takes approximately seven to ten business days.

◆ Your packet contains a Business Sign form which should be completed even if your business will not have any signs. Sign permits are issued by the Building Department. Sign fees vary to size and will be added, it is imperative that you inform the City Clerk's office once the sign is installed.

It is strongly advised that businesses verify zoning regulations based upon type of business selected prior to obtaining business tax receipt. Contact the Development Services Department at 386/775-5415 for sign regulations and 386/775-5417 for zoning questions

◆ There is a \$15 application fee and, if applicable, a Home Based Business/Occupation fee of \$25. These fees are nonrefundable and are payable at the time your application is submitted to the Clerk's Office.

◆ All city business taxes 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 assessed after April 1st will be issued at one-half the annual fee due.

◆ Please note that it is a violation of City Code to operate a business in the City of Orange City without first paying your local business taxes and obtaining a business tax receipt. Failure to obtain your business tax receipt prior to the commencement of business will result in a penalty equal to 25% of the taxes due.

You will be notified when your business tax receipt is ready to be picked up. Payment will be due at that time.



LOCAL BUSINESS TAX APPLICATION

City of Orange City

205 E. Graves Avenue ♦ Orange City, Florida 32763 ♦ 386/775-5403

CHECK THE FOLLOWING WHICH APPLIES: Landlord Add Classification. Change Classification
 NEW/Commercial NEW/Home-Based Business **I acknowledge receipt of Home Office Restrictions.** _____(Initial)
 TRANSFER: Name Location Ownership

Transferred From: _____

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 CITY CODE.

PLEASE TYPE OR PRINT CLEARLY:

- Name of Business _____
- Address of Business _____
 City _____ State _____ Zip _____ Business Phone (____) _____
- Email Address: _____ Date open in Orange City _____
- Mailing Address for Business _____
- Additional Information: (If Applicable) State License # or Fictitious Registration # (Attach Copy) _____
 (If Restaurants/Cafes) _____ Value of Inventory (If Merchant Category) _____
 Chairs/Seats _____
 Number of Employees _____
 Disabled Veteran 65 years old or older Physically Disabled Widow with minor dependents
 Reason for Fictitious Name Exemption: Licensed Professional First & Last Name Used Incorporated
 Other _____
- Describe Operation of Business / Profession at This Location: _____

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 ORDINANCE, 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 PERJURY, I DECLARE I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

Signature of Applicant _____ _____
Title _____ _____
Date

Print Name

<i>For Official Use Only</i>							
	Class	Bus Tax	Transfe r	Late Fee	Total		
<input type="checkbox"/> Business Tax						Date Issued	Approved: _____
<input type="checkbox"/> Transfer							Fire Marshall/Date
<input type="checkbox"/> Relocate	Application Fee and/or Home					Total Paid \$ _____	
<input type="checkbox"/> _____	Fire Inspection Fee						
	Sign Permit Fee						

OWNERSHIP INFORMATION

Please Print

LEGAL AUTHORITY: Florida Statute 205.0535(5) – NO BUSINESS TAX RECEIPT SHALL BE ISSUED UNLESS THE FEDERAL EMPLOYER IDENTIFICATION NUMBER OR SOCIAL SECURITY NUMBER IS OBTAINED FROM THE PERSON(S) TO BE TAXED.

SOLE OWNER/PARTNERS/CO-OWNERS

OWNER NAME _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

SOCIAL SECURITY NO _____.

OWNER NAME _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

SOCIAL SECURITY NO _____

CORPORATION/LLC/LP/P.A.

CORPORATION NAME _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

FED ID# _____

CORPORATE OFFICERS

NAME _____ TITLE _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

NAME _____ TITLE _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

NAME _____ TITLE _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____



BUSINESS SIGNS

You must obtain a permit for any signs at your business. Sign permits are issued by the Building Department. The Orange City Code of Ordinances states that, "Sign means any object, device, display, structure, supporting structure or part thereof situated outdoors or indoors that is used to advertise, identify, display, direct or attract attention to an object, person, institution, organization, business, religious group, product, service, event or location by any means, including words, letters, figures, designs, symbols, fixtures, colors, illumination or projected images."

I certify that I will have a sign: YES [] NO []

You will need to contact the City Clerk's office as soon as a sign is installed

Business Name: _____

Business Address: _____

Applicant Name: _____

Telephone Number: _____

Signature: _____

Date: _____



ORANGE CITY POLICE
 DEPARTMENT
 207 NORTH HOLLY
 AVENUE ORANGE
 CITY, FLORIDA 32763
 {386} 775-9999

BUSINESS/MERCHANT EMERGENCY CONTACT FORM

| _____
 BUSINESS NAME:

| _____
 BUSINESS PHYSICAL ADDRESS:

| _____
 BUSINESS TELEPHONE WITH AREA CODE: |{

| _____
 BUSINESS EMAIL ADDRESS:

| _____
 BUSINESS OWNER NAME:

| BUSINESS OWNER MAILING ADDRESS:

EMERGENCY CONTACT #1 NAME:		TITLE :	
TELEPHONE WITH AREA CODE:	{ } .	CELL: { } .	
EMERGENCY CONTACT #2 NAME:		TITLE :	
TELEPHONE WITH AREA CODE:	{ } .	CELL: { } .	

ALARM COMPANY NAME AND TELEPHONE {IF APPLICABLE}:	() .
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| ADDITIONAL COMMENTS:



**Orange City Fire Department
Pre-Incident Planning Worksheet**

Business Name: _____

Business Address: _____ Unit # _____

Business Manager: _____

Business Phone: _____ Home Phone: _____

Home Address: _____

Property Owner: _____

Address: _____ Phone No. _____

Square feet: _____ Building height (stories): _____

Fire alarm (yes/no): _____ Fire Sprinkler System (yes/no): _____

Alarm Company Name: _____ Phone No. _____

List any hazardous materials (flammable, combustible, gas, toxic, etc.):

List at least two emergency contacts (you may include yourself):

(1) _____
(Name) (Phone number)

Key Holder (yes/no) _____

(2) _____
(Name) (Phone number)

Key Holder (yes/no) _____

HEALTH DEPARTMENT NOTICE!

INFORMATION FOR APPROVAL OF EXISTING SEPTIC SYSTEM FOR A CHANGE OF BUSINESS, TENANT OR OWNERSHIP

Florida Statute 381.0065 requires that all businesses that use a septic tank system for sewage disposal obtain approval from the local health department any time that there is a change in the business owner, business type or a tenant. Septic tank systems are specifically sized based on the type of business that is connected to the system. Changes in business operations can increase the sewage flow, or change the sewage characteristics and that may cause premature septic system failure resulting in a sanitary nuisance and expensive repairs. The approval process for a new business or tenants is listed below.

- 1) Complete an application for an Existing Septic system approval. You will need to know the Parcel ID Number, size of the property, property legal description, property owner and address, zoning, source of drinking water and list the type of business(s) at the location. Also, note on the application what the previous use or operation was for the building or suite multi-tenant building.
- 2) Submit with the application, a site plan drawn to scale of the property. The site plan must show where the septic system is located, any wells on the property and all buildings, parking areas, ditches, ponds or other surface water.
- 3) The septic tank, if not pumped out in the past three years, must be pumped. Bring a receipt for this printout with you to our office. This receipt must indicate the tank capacity in gallons and the condition of the tank.
- 4) Pay the necessary approval fee. Any building that has been vacant for more than one year is required to have the septic system brought into compliance with the current code. Any system not meeting specific code setbacks, systems that have been paved over or under parking areas, systems in failure or systems that have been repaired without a permit, will not be approved and must be corrected prior to approval.

Contact the following offices for more information regarding Existing Septic System approvals. **PLEASE DO NOT START RENOVATION OR REMODELING OF YOUR BUSINESS UNTIL WE HAVE APPROVED THE SEPTIC SYSTEM FOR USE!!** THE APPROVAL OF THE Septic SYSTEM: DOES NOT GUARANTEE. FUNCTION FOR ANY SPECIFIC PERIOD OF TIME AND ALL OTHER STATE, COUNTY AND/OR CITY BUILDING AND CODE REQUIREMENTS MUST BE IN COMPLIANCE.

Daytona Beach office	- 1845 Holsonback Drive	386-274-0694
New Smyrna Beach office	- 717 Canal Street	386-424-2061
DeLand office	- 121 N. Rich Ave.	386-822-6250

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 MARSHALL 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” 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.