

# Miami-Dade County Local Business Tax Receipt Application Form

<p style="text-align: center;"><b>Apply</b></p> <p><b>On-line at:</b> <a href="http://www.miamidade.county-taxes.com/btexpress">www.miamidade.county-taxes.com/btexpress</a></p> <p><b>In person at:</b> The Tax Collector's Office 200 NW 2<sup>nd</sup> Avenue, Miami</p> <p><b>Mail to:</b> Miami-Dade Tax Collector Local Business Tax Section 200 NW 2<sup>nd</sup> Ave Miami, FL 33128</p> <p><b>Fax:</b> (305) 372-6368    <b>Info-line:</b> (305) 270-4949</p>	<p style="text-align: center;">OFFICE USE ONLY</p> <p>Local Business Tax Receipt #:</p> <p>Section/Sub-code:</p> <p>___ Unincorporated    ___ Municipality</p> <p>___ State License    ___ Corp/Fict. Name</p> <p>Clerk: _____ Date: _____</p>
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**1. BUSINESS INFORMATION:** (Additional instructions found at bottom of page.)

**a. Business Name/Fictitious Name/ D/B/A:** \_\_\_\_\_

**b. Business Address:** \_\_\_\_\_ **Phone # :** (    )    -    \_\_\_\_\_

Description of location:     Office     Store     Warehouse     Home Office

**c. Owner's/Corporation name (incl. President):** \_\_\_\_\_

**d. Mailing/Owner's Address:** \_\_\_\_\_ **Phone # :** (    )    -    \_\_\_\_\_

**e. Federal Employer ID:** \_\_\_\_\_ **or Social Security #:** \_\_\_\_\_ -    -    \_\_\_\_\_

**f. Business Start Date:** \_\_\_\_\_ /    /    \_\_\_\_\_ **g. E-mail Address:** \_\_\_\_\_

**2. NATURE OF BUSINESS:** \_\_\_\_\_

Maximum number of Employees     Machines/Equipment     Seats     Rooms/Apts.

**3. SURVEY:** Please provide your business NAICS code \_\_\_\_\_ This North American Industrial Classification System codes can be found at [www.census.gov/naics](http://www.census.gov/naics).

**4. IDENTIFICATION:**

\_\_\_\_\_  
**Applicant's Name (Please print)**

\_\_\_\_\_  
**Applicant's Title**

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Driver's License Number and State**

- 1a.** Applicants not using full legal name must present proof of their Fictitious Name (see [www.sunbiz.org](http://www.sunbiz.org)).
- 1b.** If the business is located within a City, a City Business Tax Receipt is also required; businesses located in the unincorporated area must also obtain a certificate of use from Planning & Zoning Division (786) 315-2660.
- 1c.** A copy of the certificate of registration of the corporation must be submitted (see [www.sunbiz.org](http://www.sunbiz.org) )
- 1e.** Submit a copy of documentation showing a Federal Employer Identification Number or Tax ID Number. If not applicable, then a copy of a Social Security Card is required.
- 2.** If your business is regulated by a State or County Agency, you must present a copy of an active license. View requirements at [www.miamidade.gov/taxcollector/business-taxes.asp](http://www.miamidade.gov/taxcollector/business-taxes.asp) .

Social Security numbers are solely for compliance with Florida Statute 205.0535: "A (Local Business Tax) receipt may not be issued unless the federal employer identification number or social security number is obtained from the person to be taxed."

**All information provided will become part of the public records; however, Social Security Numbers have protections under confidentiality laws of the State of Florida. [Rev. 2/17/2017]**