APPLICATION FOR BUSINESS TAX EXEMPTION FOR

VETERANS, SPOUSES OF VETERANS AND CERTAIN SERVICEMEMBERS, AND LOW-INCOME PERSONS

| | , hereby certify that: |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| 1. I am (make a selection below): | |
| (a) A veteran of the United States Armed Forces who was h service, or the spouse or un-remarried surviving spouse | |
| of the following: DD Form 214, Certificate of Release or Dis United States Department of Defense | scharge from Active Duty, issued by the |
| Veteran Identification Card, issued by the Upursuant to the Veterans Identification Card | United States Department of Veterans Affairs d Act of 2015, Pub. L 114-31 |
| Valid Florida Driver License or Florida Ide designation | |
| (b) The spouse of an active duty military service member w pursuant to a permanent change of station order, as verification. | fied by providing: |
| Military Permanent Change of Station (PCS) (c) A person who is receiving public assistance as defined in providing: | |
| 1 | Children and Families' Access Florida Benefits ttes shown) |
| (d) A person whose household income is below 130 percent current year's federal poverty guidelines, as verified by Tax return from last tax year | t of the federal poverty level based on the |
| 2. I claim exemption from the payment of County Business Tax und | der the provisions of Fla. Stat. §205.055. |
| 3. The business or occupation for which I desire a Business Tax Recapplication form and that such business or occupation is carried o means of livelihood. | |
| 4. COMPLETE ONLY IF APPLICABLE : I own a majority employees. As I am exempt from the payment of the County Bu 1 above, I claim an exemption from the payment of the County B | |
| 5. Prior to requesting a renewal of said Business Tax Receipt, I will qualify for the exemption. | notify the Tax Collector should I no longer |
| UNDER PENALITES OF PERJURY, I DECLARE THAT I H AND THAT THE | IAVE READ THE FORGOING DOCUMENT E FACTS IN IT ARE TRUE AND CORRECT |
| | Signature of Applicant |