

CLASS _____

LICENSE # _____

FEE _____

BUSINESS TAX RECEIPT APPLICATION

City of Valparaiso
465 Valparaiso Pkwy
Valparaiso, FL 32580

FILLING THIS APPLICATION FOR A CITY LICENSE DOES NOT ALLOW APPLICANT TO OPERATE OR ENGAGE IN ANY TYPE OF BUSINESS UNTIL THE CITY CLERK ISSUES A BUSINESS TAX RECEIPT TO THE APPLICANT. ANY BUSINESS OR PROFESSION WITHOUT A BUSSINESS TAX RECEIPT SHALL BE PUNISHED IN ACCORDANCE WITH CITY CODE.

Today's Date _____

PLEASE TYPE OR PRINT CLEARLY:

Name of Business (DBA) Individual _____

Address of Business _____

City _____ State _____ Zip _____

Business Phone _____

Mail Renewal Notice to _____

Applicant Information:

Name _____

Home Address _____

City _____ State _____ Zip _____

Social Security # _____ D. O. B. _____

State Driver's License # _____

Emergency Contact Person _____

Phone Number _____

THE CITY OF VALPARAISO COLLECTS YOUR SOCIAL SECURITY NUMBER FOR THE FOLLOWING PURPOSES: CLASSIFICATION OF ACCOUNTS; IDENTIFICATION AND VERIFICATION; CREDIT WORTHINESS; BILLING AND PAYMENTS; DATA COLLECTION, RECONCILIATION, TRACKING, BENEFIT PROCESSING AND TAX REPORTING. SOCIAL SECURITY NUMBERS ARE ALSO USED AS A UNIQUE NUMERIC IDENTIFIER AND MAY BE USED FOR SEARCH PURPOSES.