According to Ordinance #837, any persons, firms, businesses or home occupations located or operating in the City of Callaway must obtain (and maintain) a local Business Tax Receipt (BTR). This checklist should provide all the information you need to get your Business Tax Receipt.

- **Determine the type of business you want to open.**
- **Note the address of the desired business location.** Is it in the City of Callaway? If you’re not sure whether you are in the City or not, call us at (850) 871-6000.
- Obtain any necessary **State licenses, registrations or permits.** Your business name must match the state documentation and you must provide proof of fictitious registration, articles of incorporation or LLC and FEIN.
- If your business name will include the **owner’s first and last name**, then state registration is not necessary.
- Complete the **Callaway Residential Business Tax Receipt Application.**
- Once the **completed application and copies of all back-up documents** are turned in to the Business Tax Department, a sign will be placed in front of the property for ten (10) calendar days. After the 10 days, your application will be reviewed for approval.
- Upon notification of approval, please **bring the sign and $50.00** to the Business Tax Department and your BTR will be created.

**Renewals:**
All Business Tax Receipts expire September 30th. Invoices are mailed mid-August and are due no later than October 1st. Each business is given an option of paying later with a delinquency penalty. In October the penalty is an additional $5.00, November - $7.50, December - $10.00, and January - $12.50. After **February 1st an additional late-payment penalty of $250.00** may be applied to any unpaid Business Tax Receipt renewal.

**Failure to receive an invoice is not an excuse for non-payment.**
RESIDENTIAL BUSINESS TAX APPLICATION

Name of Business _____________________________________________________

Name of Owner(s)_____________________________________________________

Owner(s) SS# or Federal ID Number_______________________________________

Physical Address _____________________________________________________

Mailing Address _____________________________________________________

Nature of Business ____________________________________________________

Telephone Number______________

Do you currently operate other business(es) within the City of Callaway?
Yes_______ No________

*If yes, please list name(s) and address(es)________________________________

Number of employees: _________

*When a person’s occupation, profession, or business shall fall into more than one classification, only one local business tax will be required. However, you will need to obtain an exempt receipt at no charge for any other classifications.
Please answer the following questions, understanding that a “yes” answer may be in violation of Ordinance No. 837 and will require explanation and review.

1. Will any of your business be conducted on the property but outside the confines of your residence? (i.e. front or back yard, porch or carport)  
   ___Yes   ___No

2. Will you employ anyone other than the family members that are living at the residence?  
   ___Yes   ___No

3. Will any materials, equipment, or supplies be stored outside your residence or accessory structure?  
   ___Yes   ___No

4. Will you generate additional traffic at your residence due to business related visitors or deliveries?  
   ___Yes   ___No

5. Will your business create noise, vibration, glare, fumes, odors, dust, smoke, or electrical interference that will pass beyond your property line or through a common wall to your neighbor?  
   ___Yes   ___No

6. Do you plan to display any signs, name plates, or advertisements on or about your residence? (Not including vehicle/trailer)  
   ___Yes   ___No

I have read and understand Ordinance #837.

_________________________________________________________________

Applicant’s Signature               Date

(DO NOT WRITE BELOW THIS LINE)

VERIFICATION/APPROVAL OF APPLICATION

The application has been verified by Catrese Bowley ______.  
Initial

The 10 day waiting period has begun and will expire ___________.  
Date

The application has been approved by City Clerk, Janice L. Peters  
Initial       Date

(Rev. 06/19/13 CB)