



Business Tax Department
6601 E. Hwy 22* Callaway, FL 32404
PH: 850-871-6000*FX: 850-871-2444

The City of Callaway is eager to help business owners succeed in opening a business within the city limits. This checklist should provide all the information you need to get your business tax receipt in accordance with City of Callaway Ordinance #837.

- ✓ **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. If you own the property where the business is located, provide a copy of your deed or settlement statement. If not, you must include a copy of your lease agreement.
- ✓ It is a good idea to **check Zoning regulations** before starting any business activity. Call us with your address at (850) 871-4672 to check zoning appropriateness.
- ✓ 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.
- ✓ Complete the **Callaway Business Tax Receipt Application.**

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.



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COMMERCIAL 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 _____

Number of Employees (at this location): _____

State License # (if applicable, a copy is required): _____

Does this business sell bottled gas (propane)? Yes _____ No _____

Do you currently operate other businesses within the City of Callaway?

Yes _____ No _____

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

*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.

I have read and understand Ordinance #837.

Applicant's Signature

Date

Note: 1. If you are applying for a receipt and will maintain a permanent business location or branch office within the City in a commercially zoned area (newly constructed buildings may be required to have proof of a Fire Inspection prior to issuance of the receipt.) Please call the City of Callaway Building Official at (850) 874-9347.

Note: 2. A back flow device is required on most Commercial Businesses. The Utility Supervisor will be contacting you within a few days to inform you of your options.

(DO NOT WRITE BELOW THIS LINE)

PLANNING DEPARTMENT APPROVAL

Complies with the City of Callaway Comprehensive Growth Development Plan:

Yes _____ No _____

Complies with the City of Callaway Land Development Regulations:

Yes _____ No _____

Approved by the Planning Department:

Yes _____ No _____

William Frye, Director of Public Works/Planning

Date



CALLAWAY FIRE DEPARTMENT



Fire Chief David P. Joyner, Jr.
djoyner@cityofcallaway.com
(850)871-5300

Name of Business: _____

Address of Business: _____

Owner Name: _____

Phone #: _____

Primary Contact: _____

Phone #: _____

Secondary Contact: _____

Phone #: _____

Hours of Operation: _____

Is this a commercial or residential location? Residential Commercial

Average number of occupants? _____

Return to Fire Department when Completed