

## **Business Tax Department**

6601 E. Hwy. 22\*Callaway, FL 32404 PH: (850) 871-6000

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 <u>Business Tax Receipt</u> (**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 30<sup>th</sup>. Invoices are mailed mid-August and are due no later than October 1<sup>st</sup>. 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 1<sup>st</sup> 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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## **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.

\*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.

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1.	Will any of your business be conducted on the property but (i.e. front or back yard, porch or carport)	Yes	No No	our residence?	
2.	Will you employ anyone other than the family members the	nat are living Yes	at the residence	ce?	
3.	Will any materials, equipment, or supplies be stored outside			ory structure?	
4.	Will you generate additional traffic at your residence due			or deliveries?	
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?				
6.	Do you plan to display any signs, name plates, or advertise (Not including vehicle/trailer)	Yes ements on orYes	No about your resNo	sidence?	
	applicant's Signature		Date		
(DO NOT WRITE BELOW THIS LINE)					
	VERIFICATION/APPROVAL	OF APPL	CATION		
Tł	ne application has been verified by Catrese Bowley				
Tł	ne 10 day waiting period has begun and will expire	 e			
Tl	he application has been approved by City Clerk, Ashley	Robyck	 Initial	Date	

Please answer the following questions, understanding that a "yes" answer may be in violation of

Ordinance No. 837 and will require explanation and review.