



**CITY OF ALTAMONTE SPRINGS**

225 Newburyport Avenue

Altamonte Springs, FL 32701-3697

407-571-8116

**TO THE APPLICANT:**

Attached is the City of Altamonte Springs Business Tax Receipt Application packet.

**PLEASE NOTE - YOUR BUSINESS TAX RECEIPT(S) CANNOT BE ISSUED WITHOUT THE FOLLOWING REQUIREMENTS:**

1. The application must be completed **IN FULL**.
2. Payment of business tax **AND** application fee **AND** any penalties imposed. **FOR FEES, CALL 407-571-8116.**
3. The Ownership Information Form must include FULL and COMPLETE information on the corporate officers (corporations) and partners (partnership). **Florida Statute 205.0535(5) requires that “ NO BUSINESS TAX RECEIPT SHALL BE ISSUED UNLESS THE FEDERAL EMPLOYER IDENTIFICATION NUMBER OR SOCIAL SECURITY NUMBER IS OBTAINED FROM THE PERSON TO BE TAXED”.**
4. If your business or profession requires a state license, a copy of that license must be attached to your application.
5. Your Fictitious Name Registration Number or reason for exemption must be completed on the application.
6. Transfers of ownership must include a copy of the Bill of Sale or transfer documents.

Submittal of this application for a City Business Tax Receipt does not permit the applicant to operate or engage in any type of business, profession or occupation until the City Clerk issues the Business Tax Receipt. When the proper approvals have been secured, your Business Tax Receipt(s) will be issued.

**TRANSFERS:** If there is **ANY CHANGE** in your business name, location (including suite) or ownership, an application must be submitted for transfer of your Business Tax Receipt(s). Your current Business Tax Receipt must be surrendered prior to issuance of your new Business Tax Receipt. A transfer fee of 10% of each annual business tax, but not less than \$3 nor more than \$25 shall be required.

**ATTENTION: ANY PERSON, FIRM OR CORPORATION WHO SHALL ENGAGE IN ANY BUSINESS, PROFESSION OR OCCUPATION PRIOR TO OBTAINING A BUSINESS TAX RECEIPT SHALL BE SUBJECT TO PENALTIES IN ACCORDANCE WITH CITY CODE SECTION 19-13(b).**

**Erin O'Donnell, CMC**  
City Clerk



# OWNERSHIP INFORMATION

PLEASE TYPE OR PRINT CLEARLY

## INDIVIDUAL OR BUSINESS SOLE OWNER

OWNER NAME \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ DATE of BIRTH \_\_\_\_\_

SOCIAL SECURITY NO. \_\_\_\_\_ DRIVERS LIC. NO. \_\_\_\_\_

\*\*\*\*\*

## CORPORATION/LLC/LP/P.A.:

CORPORATE NAME \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_ STATE \_\_\_\_\_

\*\*\*\*\*

## PARTNERS/CO-OWNERS OR CORPORATE OFFICERS:

NAME \_\_\_\_\_ TITLE: \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

DATE of BIRTH \_\_\_\_\_

\*\*\*\*\*

NAME \_\_\_\_\_ TITLE: \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

DATE of BIRTH \_\_\_\_\_

\*\*\*\*\*

NAME \_\_\_\_\_ TITLE: \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

DATE of BIRTH \_\_\_\_\_

**CITY OF ALTAMONTE SPRINGS  
SOCIAL SECURITY NUMBER COLLECTION POLICY  
NOTICE**

**STATEMENT OF POLICY:**

The following is established by the Altamonte Springs City Commission by Resolution #1170 as the policy of the City of Altamonte Springs for the collection of social security numbers. This policy is effective January 22, 2008.

The City of Altamonte Springs collects your social security number for the following purposes:

- CLASSIFICATION OF ACCOUNTS
- IDENTIFICATION AND VERIFICATION
- CREDIT WORTHINESS
- BILLING AND PAYMENTS
- BANK DRAFT AUTHORIZATIONS
- DATA COLLECTION
- RECONCILIATION
- BENEFIT PROCESSING
- BUSINESS TAX RECEIPT APPLICATIONS (per FS 205.0535(5))
- TAX REPORTING
- BENEFIT PROCESSING
- NEW UTILITY ACCOUNT APPLICATIONS
- VENDOR REGISTRATION APPLICATIONS
- VOLUNTEER CONTRACTS FOR BACKGROUND CHECKS
- POLICE STATEMENTS AND ARRESTS FOR VERIFICATION OF IDENTITY

Social security numbers are also used as a unique numeric identifier and may be used for search purposes.

This social security policy statement has been prepared by the City of Altamonte Springs in compliance with Section 119.071(5) Florida Statutes, (2007)