

CITY OF PORT ST. JOE, FLORIDA
APPLICATION FOR LOCAL BUSINESS LICENSE

Welcome to the City of Port S. Joe. If you require assistance completing this application, please call Accounts Payable at (850)-229-8261, option 6, or visit City Hall located at 305 Cecil G. Costin, Sr. Blvd. You can mail the completed application to P.O. Box 258, Port St. Joe, FL 32457, email it to bscheibe@psj.fl.gov or drop it off at the front desk of City Hall.

ABOUT YOUR BUSINESS:

- 1) Legal Business Name: _____
DBA (Fictitious Name), if any (**Registration required by State law**): _____

- 2) Business Location in Port St. Joe: _____

- 3) Mailing Address: _____
City: _____ State: _____ Zip Code: _____

- 4) Phone Number: _____ Cell: _____
Email Address: _____

- 5) Describe in detail the products being sold/services/operations/profession being requested: _____

- 6) **Required by State Law:** Federal Employer Identification Number: _____
*****Please include a copy from the Florida Department of State reflecting "active" status.*****

- 7) State License # (if applicable) _____ Expiration Date: _____

- 8) Owner or Local Officer: (Note: Partnerships/Corporations – Please list only one owner or local office below)
Name: _____ Phone Number: _____
Home Address: _____ City/State/Zip: _____
Driver's License #: _____ State: _____

- 9) Do you own/rent the property where the business is located? ___ Own ___ Rent (If rent, provide a copy of lease)

- 10) Will you be adding or changing signs on the outside of the property? ___ Yes ___ No
***If yes, a permit is required from Code Enforcement**

- 12) The Business described above ___ WILL ___ WILL NOT be operated as an Adult Use(s). Ordinance No. 283 strictly prohibits Adult Entertainment in all districts except Industrial areas.

PLEASE READ THE FOLLOWING STATEMENT AND SIGN BELOW:

I affirm, that all information that I have provided is true and correct. I further acknowledge that filing this application for a city license does NOT allow applicant to operate or engage in any type of business until the city issues a Business License. Zoning approval of this application is required prior to issuance of the Business License. **Any person, firm, or corporation who engages in any occupation, business or profession without a Business License may be punished in accordance with [Sec. 24 of City Ordinance No. 1](#).** Utility Services shall NOT be connected until application is approved by Zoning.

Authorized Signature: _____ Date: _____

Printed Name: _____ Title: _____