



CITY OF DEFUNIAK SPRINGS OCCUPATIONAL LICENSE APPLICATION

PLEASE REFER TO PAGE 4 OF THIS PACKET FOR INSTRUCTIONS AND INFORMATION ABOUT THIS APPLICATION.

SECTION 1: APPLICANT INFORMATION

Name of Applicant:

Name of Business:

Please select the applicable reason(s) for the application:

New Business Renewal of Existing Business Transfer of Ownership Changing Locations Updating Info.

Applicant's Affiliation with Business: Owner Co-Owner Authorized Agent

Name(s) of Business Partners/Officers:

Physical Address of Business:

City:

State:

ZIP Code:

Applicant's Mailing Address (if different from above):

City:

State:

ZIP Code:

Primary Phone #:

Alternate Phone #:

Email Address:

SECTION 2: PROPERTY OWNER INFORMATION

Are you the owner of the property? Yes / No (If you selected "No" then please complete Section 2.)

Property Owner's Name:

Address:

City:

State:

ZIP Code:

Primary Phone #:

Alternate Phone #:

*Attach a copy of the lease agreement or other document from the property owner

SECTION 3: EMERGENCY CONTACT INFORMATION

Name:

Relationship:

Address:

City:

State:

ZIP Code:

Primary Phone #:

Alternate Phone #:

SECTION 4: CERTIFICATION, REGISTRATION, LICENSE

FL Statues require any person applying for or renewing a local occupational license regulated by the State of FL to provide applicable active state certification or registration before such occupational license may be issued.

Name of Florida Regulatory Agency:

Type of Florida Certification, Registration or License:

FL Certification, Registration, License, Establishment License Number(s):

Expiration Date(s):

*If applicable, include a copy of the FL certification, registration or license with the submission of this application.

SECTION 5: OTHER STATE AND FEDERAL INFORMATION

State Sales Tax Number:

Federal Employer Identification Number (FEIN):

*Attach a copy of your current sales tax certificate, FEIN, and liability insurance policy (if required) with the submission of this application. (All contractors and other types of professionals/businesses are required to provide a copy of the company's liability insurance policy, as required by Florida Statues.)



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SECTION 6: MISC INFORMATION ABOUT LOCATION AND BUSINESS

Proposed/existing type of business at this location:

Previous business at this location:

Is this your only location in the City of DeFuniak Springs? Yes / No (A license is required for each location.)

Grease trap (required for food services): Yes/ No/ N/A

Backflow preventer (required for all businesses): Yes/ No

Estimated date business is to open:

Square footage of building or unit:

of employees on payroll:

of 1099 (contract) employees:

of seats (restaurants, pubs, churches, etc.):

of rental units (hotels, apartments, commercial, etc.):

of hoses (fuel sales):

of service bays (vehicle services):

of vending machines:

of cigarette machines:

of video machines, jukeboxes, pool tables, etc. (total):

of students (academies, schools, daycares, etc.):

of scales or metering devices for business:

of vehicles associated with business:

of paved regular parking spaces provided:

of paved handicapped parking spaces provided:

List proposed changes to the land use and/or premises:

SECTION 7: ACKNOWLEDGEMENTS AND SIGNATURE

By signing below, I, the applicant, declare that I have completed this application truthfully and to the best of my knowledge, and I acknowledge the following:

- Issuance of an occupational license is not an approval for a certificate of occupancy nor will not legalize the operation of a business that is in violation of city and/or state regulation;
- It is my responsibility to schedule a life safety inspection with the City of DeFuniak Springs Fire Department;
- It is my responsibility to contact the Planning Department before changing the scope of my business and/or making any physical alterations to the premises; and
- I understand that my license will expire on September 30 of each year and that I must renew my license each year prior to its expiration.

Signature of Applicant:

Date:

(The remainder of this page is left blank intentionally.)

**CITY REVIEW/APPROVAL
OFFICIAL USE ONLY**

PLANNING DEPARTMENT APPROVAL

Date Application Submitted:	Application is Complete: <input type="checkbox"/> Yes / <input type="checkbox"/> No
Change of Use: <input type="checkbox"/> Yes / <input type="checkbox"/> No	Special Approval Required: <input type="checkbox"/> Yes / <input type="checkbox"/> No
Future Land Use Map (FLUM) Designation:	Zoning/Overlay District:
Comp Plan and Zoning Ordinance Compliance: <input type="checkbox"/> Yes / <input type="checkbox"/> No	Parking, Buffer and/or Landscape Code Compliance: <input type="checkbox"/> Yes / <input type="checkbox"/> No
Permits Required: <input type="checkbox"/> Yes / <input type="checkbox"/> No/ <input type="checkbox"/> N/A	State License/Cert/Registration Valid: <input type="checkbox"/> Yes / <input type="checkbox"/> No/ <input type="checkbox"/> N/A
Approval Signature:	Date:

Comments:

CODE ENFORCEMENT APPROVAL

Business/Property has Active Code Violations: <input type="checkbox"/> Yes / <input type="checkbox"/> No	Business/Property Meets Code: <input type="checkbox"/> Yes / <input type="checkbox"/> No
Grease Trap is Compliant: <input type="checkbox"/> Yes / <input type="checkbox"/> No/ <input type="checkbox"/> N/A	Storm Water is Compliant: <input type="checkbox"/> Yes / <input type="checkbox"/> No/ <input type="checkbox"/> N/A
Approval Signature:	Date:

Comments:

FIRE DEPARTMENT APPROVAL

Date of Final Life Safety Inspection:	Business Complies with Fire/Life Safety Codes: <input type="checkbox"/> Yes / <input type="checkbox"/> No
Approval Signature:	Date:

Comments:

WATER AND WASTEWATER APPROVAL

Water is Available to Property: <input type="checkbox"/> Yes / <input type="checkbox"/> No	Verification of Connection and No Outstanding Issues: <input type="checkbox"/> Yes/ <input type="checkbox"/> No/ <input type="checkbox"/> N/A
Sewer is Available to Property: <input type="checkbox"/> Yes / <input type="checkbox"/> No	Backflow is Compliant: <input type="checkbox"/> Yes / <input type="checkbox"/> No
Approval Signature:	Date:

Comments:

GAS DEPARTMENT APPROVAL

Gas is Available to Property: <input type="checkbox"/> Yes / <input type="checkbox"/> No	Verification of Connection & No Outstanding Issues: <input type="checkbox"/> Yes/ <input type="checkbox"/> No/ <input type="checkbox"/> N/A
Approval Signature:	Date:

Comments:

UTILITY BILLING APPROVAL

Water Impact and Tap Fees Paid: <input type="checkbox"/> Yes / <input type="checkbox"/> No/ <input type="checkbox"/> N/A	Fire/Public Safety Impact Fees Paid: <input type="checkbox"/> Yes / <input type="checkbox"/> No/ <input type="checkbox"/> N/A
Sewer Impact and Tap Fees Paid: <input type="checkbox"/> Yes / <input type="checkbox"/> No/ <input type="checkbox"/> N/A	Gas Tap Fees Paid: <input type="checkbox"/> Yes / <input type="checkbox"/> No/ <input type="checkbox"/> N/A
Unpaid Balances on Account: <input type="checkbox"/> Yes / <input type="checkbox"/> No	Outstanding Issues on Account: <input type="checkbox"/> Yes / <input type="checkbox"/> No
Approval Signature:	Date:

Comments:

SANITATION APPROVAL

Letter from Applicant Received: <input type="checkbox"/> Yes / <input type="checkbox"/> No	Dumpster Location and Enclosure Approved: <input type="checkbox"/> Yes / <input type="checkbox"/> No/ <input type="checkbox"/> N/A
Approval Signature:	Date:

Comments:

ISSUANCE OF OCCUPATIONAL LICENSE

Cost of License:	Date Paid:
Location #:	City License #:
Approval Signature:	Date:

Comments:

General Instructions and Information

- Who needs an occupational license?
 - If you are operating a business within the DeFuniak Springs City Limits, an occupational license is required.
 - If you have more than one location in the DeFuniak Springs City Limits, a license is required for each location.

- How do I apply for an occupational license?
 - Complete Pages 1 and 2 of this packet. Ensure the application is complete and legible.
 - Page 3 is for city personnel to complete; please leave this page blank.
 - Attach a copy of your driver's license or other form of photo identification.
 - If you do not own the property where your business is/will be located, provide a copy of your lease agreement.
 - If your business is regulated by the State of Florida, attach your valid state license, certification or registration.
 - Attach a copy of your current sales tax certificate. If your business provides a service but does not sell any merchandise, this is not required.
 - Attach a copy of your current federal employer identification number (FEIN). If you do not have employees on your payroll, this is not required. (Note: if you have 1099 employees, each of these employees will require a separate license.
 - Attach a copy of your current liability insurance policy, if required. (All contractors and other types of professionals/businesses are required to provide a copy of the company's liability insurance policy, as required by Florida Statutes.)
 - Submit the completed application and required attachments to the planning department, in person or by mail, at 35 US Highway 90 West, DeFuniak Springs, FL 32433.

- What happens next?
 - Planning staff will verify that all information is received and that your business is allowed at the location requested. They will also ensure parking, buffers, and other code requirements are met. They will then forward your application to the departments who must review it.
 - Fire department staff will contact you to schedule a life safety inspection.
 - Water department staff will verify that the business has an approved backflow device and that the device has been inspected as required by City Code.
 - Code enforcement staff will inspect the grease trap, if required.
 - Other staff may contact you if additional information and/or inspections are required.
 - Once your application is processed, staff will contact you so that you may pay fees and pick up your license.
 - Note: your license will be valid until September 30 of the year in which it is issued. To keep your license valid, you must renew it each year by October 1.

- Questions?
 - If you have questions regarding this application, or the status of your application, please contact planning staff by calling 850-892-8571. Code enforcement staff may also be reached at this number.
 - If you need to reach the fire department or schedule a life safety inspection, please call 850-892-8515.
 - If you have questions about utilities lines or about sanitation services available to a specific property, please call public works staff at 850-892-8537.
 - If you have questions about the cost of a license or about utility-related fees, please call utility billing staff at 850-892-8503.