

BAL HARBOUR

- V I L L A G E -

APPLICATION FOR RESORT TAX REGISTRATION CERTIFICATE

(Per Ordinance No. 411)

Individual Corporate Or Trade Name Under Which Business Will Be Transacted
Name Of Present Owner Or Owners
Street Address Of Business Location
State Whether Corporation, Partnership, Individual Proprietorship Complete Etc.

If A Partnership Or Corporation Complete The Following Schedule :			
Full Name Of Partners Or Officers	Home Address	Corporate Officer Or Interest In Partnership	
If A Corporation, Show Name And Address Of Individual Designated To Forward Resort Tax Reports And Payments:			
Name:		Address:	
What Kind of Business Do You Operate? -			
(Hotel, Motel, Apartment House, Bar, Night Club, Restaurant, Etc. If Combination, E.G. Hotel and Restaurant)			
	Month	Day	Year
If New Business, Give Opening Date:			
If Change Of Ownership, Give Effective Date:			
Name, Address, And Telephone Number At Which Books And Records Are Kept:			
Name:			
Address:			
Telephone Number:			
IMPORTANT - All Information Requested Must Be Given And The Application Signed By The Operator			
Signature Of Operator:			
Date:			
Title:			
(State Whether Individual Owner, Member Of Firm, Executor, Administrator, Trustees, Etc., Or Give Title Of Officer Of Corporation)			

Do Not Write In This Space

Mail To: Finance Department - Bal Harbour Village
655 96th Street, Bal Harbour Village, FL 33154

Certificate Number _____
Class _____