



APPLICATION FOR SOLICITOR, CANVASSER OR PEDDLER PERMIT

City of Dunedin, Florida ♦ Community Development
737 Loudon Avenue, Dunedin, FL 34698 ♦ 727-298-3210 ♦ www.dunedingov.com

APPLICANT'S NAME: _____

MAILING ADDRESS: _____

CITY / STATE / ZIP: _____

PHONE NUMBER: _____ EMAIL: _____

APPLICANT'S AFFIRMATION: I, the undersigned, do hereby affirm that the information given in this application is complete and accurate. If granted a permit, I agree to operate within all applicable laws and ordinances, and to notify the City if any of the information I have given changes. I further understand that no portion of the \$100.00 annual permit fee is refundable, and in the event of non-compliance this application and the permit shall be subject to revocation.

NOTICE: It shall be unlawful for any solicitor, canvasser or peddler to engage in such business or act within the city without first obtaining and possessing a valid city permit in compliance with the provisions of Chapter 62, Article II of the Dunedin Code of Ordinances.

Signature of Applicant

Date

(FOR OFFICE USE ONLY BELOW)



**CITY OF DUNEDIN, FLORIDA
SOLICITOR, CANVASSER OR PEDDLER PERMIT**

ISSUE DATE: _____ **EXPIRES:** _____

Permission is hereby granted for the person named hereon, as principal, to act as a solicitor, canvasser or peddler the City of Dunedin subject to Chapter 62, Article II of City Code.

PERMIT HOLDER: _____

MAILING ADDRESS: _____

CITY / STATE / ZIP: _____

The permit is the property of the city and is not transferable to any other person other than the named permit holder. A permit holder shall apply for a renewal of the permit at least 30 days but not more than 60 days prior to the expiration of the permit.

Director of Community Development



LOCAL BUSINESS TAX RECEIPT (BTR) APPLICATION
 City of Dunedin, Florida ♦ Community Development Department
 737 Loudon Avenue ♦ Dunedin, FL 34698 ♦ 727-298-3210 ♦ www.dunedingov.com

APPLICANT INFORMATION			
Applicant's Full Name:		Date of Birth:	
Home Address:			
Phone Number:		Email Address:	
Driver's License No:		Social Security No:	
Do you qualify for a fee exemption pursuant to State law? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If yes, complete an APPLICATION FOR LOCAL BUSINESS TAX RECEIPT EXEMPTION and provide proof as required by law.			

BUSINESS INFORMATION			
Business Name:		Federal ID No:	
Business Address:		Mailing Address:	
Business Description:			
Business Type: [Check one]	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Corporation (CORP, INC)	<input type="checkbox"/> Limited Liability Company (LLC)
	<input type="checkbox"/> Partnership (LP, LLP, GP)	<input type="checkbox"/> Other _____	
Fictitious Name Registration? [Check one] Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, provide proof of registration as required by F.S. § 205.023.)			
Total Square Feet or Square Footage of Business: [Check one]		Annual Business Tax (Per Classification)	
<input type="checkbox"/> Less than 10,000 square feet		\$50.00 each	
<input type="checkbox"/> At least 10,000 square feet but no more than 50,00 square feet		\$100.00 each	
<input type="checkbox"/> More than 50,000 square feet		\$200.00 each	

Applicant's Affirmation: I, the undersigned, do hereby affirm that the information given in this application is complete and accurate, and I understand that to make false statements within this application may result in denial of application and possible legal action. If granted a Local Business Tax Receipt (BTR), I agree to operate within all applicable City and State laws, and to notify the City if any of the information I have given changes. I further understand that no portion of the Business Tax is refundable, and in the event of non-compliance this application and the BTR shall be subject to revocation.

Applicant's Signature _____ Printed Name _____ Date _____

OFFICE USE ONLY					
LOCAL BUSINESS TAX RECEIPT INFORMATION			FEE TYPES	FEE	DUE
BTR NO:		RECEIVED:	INITIAL APPLICATION FEE:	\$20.00	
CATEGORY NO:	CLASSIFICATION:		LESS THAN 10,000 SF:	\$50.00 each Classification	
			10,000 SF TO 50,000 SF:	\$100.00 each Classification	
			MORE THAN 50,000 SF:	\$200.00 each Classification	
			FIRE INSPECTION FEE:	\$53.00	
			TRANSFER FEE:	10% (\$3.00-\$25.00)	
APPROVALS	INITIALS/DATE	COMMENTS	PENALTY:	25%	
ZONING:			MULTIMODAL IMPACT FEE:	CH. 150, P.C. CODE	
BUILDING:			MISCELLANEOUS:		
FIRE:			TOTAL DUE:		

LOCAL BUSINESS TAX RECEIPT (BTR) APPLICATION

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Each applicant shall be required to procure a separate receipt for each classification which applies to his/her activities.

Where more than one local business tax is paid at the same location under the same business name, a single receipt may be issued describing the various business taxes represented by such local business tax receipt. In such cases, the amount paid for each business tax represented will be the same as though they were on separate business tax receipts. This clause serves only to permit the city to consolidate separate business taxes into one business tax receipt.

A business engaging in more than one classification at the same location shall pay a separate business tax for each classification which applies to its activities as if each were a separate business.

LISTING OF CATEGORIES AND CLASSIFICATIONS

Category		Classifications
1	Automotive	Auto dealership, paint and body shop, parking, rental or leasing, repair, transportation, washing and polishing, wrecking and hauling, gas service station, or similar businesses
2	Services/Business and Personal	Advertising, alteration services, animal services, artist, automobile detailing, barbershop, business consultant, business office, child care, cleaning service, computer service, dry-cleaning/laundry, employment agency, florist, funeral home, hair/nail salon, inspection service, import/export business, leasing, locksmith, moving company, newspaper, pest control, photographer, property management, psychic/palm reader, repair shop, storage warehouse, talent agency, tanning salon, tree service, vending machines, window tinting, or similar businesses
3	Contractors	All contractors including general, building, residential, electrical, gas, irrigation, mechanical, plumbing, roofing, solar, swimming pool, underground utility, or similar businesses
4	Education	Colleges, childcare, private school, tutoring, or similar businesses
5	Entertainment/ Recreation/Fitness	Amusement center/arcade, athletic club/fitness center, bowling alley, carnival, coin operated amusement, dancing school, golf course/driving range, karate/martial arts studio, movie theater, music school/teacher, nightclub, riding academy, rinks (bicycle, skating, other), tennis/racquetball club, travel agency, or similar businesses
6	Financial Services	ATM, bank, bondsmen, brokers (mortgage, boat, ship, yacht, stocks, bonds, etc.), collection/claims agents, finance (loans, mortgage, personal), insurance agency/adjuster/agent, or similar businesses
7	Food/Beverage Services	Bar, lounge, restaurant, café, lunch stand, caterer, or similar businesses
8	Health Care	Ambulance service, ambulatory care facility, blood bank, convalescent home, dental laboratory, hospital, medical laboratory, sanitarium, surgical center, urgent care facility, or similar businesses
9	Manufacturing/Industrial	Cabinet makers, carpentry, industrial, machine shop, manufacturer, or similar businesses
10	Professional Services	Accountant, auditor and bookkeeper, acupuncture, analytical chemists, architects, attorneys, chiropractors, counseling, dentists, dentist associates, detectives or investigators, dietician, physicians, pediatricians, surgeons and specialists, engineers, funeral directors and embalmers, hearing aid specialist, homeopathic physician, hypnotist, interior designers, laboratory technician, testing and research, includes dental and medical, landscape architects, land surveyors, massage therapist, medical examiners, naturopaths, nursing home administrators, opticians, optometrists or oculists, optical dispensary, orthopedics, osteopathic medical examiners, phrenologists, podiatrists, psychologist, veterinarian, or similar professions
11	Residential/Hotels and Motels	Hotel, motel, apartments/rooming house, adult congregate living facility, assisted living facility, or similar businesses
12	Retail/Wholesale	Merchant, consignment shop, pawnshop, rental service, or similar businesses
13	Utilities	Cable service, electric/power company, gas company, or similar businesses
14	Non-Classified	Not otherwise classified



BUSINESS TAX RECEIPT SUPPLEMENTAL FORM

A Business Tax Receipt (BTR) and this supplemental form shall act as the permit required for any activity conducted pursuant to Dunedin Code of Ordinances Chapter 62, Sales, Article II, Peddlers, Solicitors and Canvassers, and Article IV, Handbills.

Permit Application Procedure. Each applicant for a permit required by Chapter 62 shall make application to the Community Development Department. The applicant shall furnish all the information required below along with a nonrefundable processing fee for the permit and/or any renewal thereof.

1. Permit fee. The permit will be in the form of a Business Tax Receipt (BTR). Each applicant shall submit a permit fee of \$100. This fee shall be in addition to the BTR fee as determined by:
https://library.municode.com/fl/dunedin/codes/code_of_ordinances?nodeId=SPAGE_OR_CH70TA_ARTIIIBUTARE_S70-80SCFE
2. Upon the filing of the initial application or an application for renewal, the Community Development Department may ask for any additional information or documentation as may be reasonably required to meet the requirements of this Chapter and any other applicable law. The Community Development Department shall issue a permit under the terms and conditions set forth.

At a minimum, all person(s) that will be engaged in the activity shall be required to:

- Provide full contact information and a photo identification for any and all person(s) that will be engaged in the activity. Anyone not so identified shall be prohibited from any activity authorized by this application.
 - The applicant assumes any and all responsibility for any person(s) identified and that are proposed to be made party to this application request. The applicant shall answer the questions in Section 4 (below) separately for each person(s) that will be engaged in the activity.
3. If the applicant is required under Section 501.022, Florida Statutes, as amended, to hold a State home solicitation permit, such State permit shall be made part of the application request and must be current, active and valid in order to be issued and hold a city permit.

Not Applicable

Copy Attached

4. Applicant must respond to the following questions and recognizes that a permit may be denied as a result:

Q: Has the applicant been convicted of any offense involving commission of a felony within the past five years or a misdemeanor within the last three years?

Yes

No

If Yes, please provide more detail:

Q: Is the applicant on parole or probation for a felony or misdemeanor?

Yes

No

If Yes, please provide more detail:

Q: Has the applicant been designated as a sexual predator?

Yes

No

If Yes, please provide more detail:

Q: Has the applicant been arrested prior or subsequent to the submission of this initial application or application for renewal?

Yes

No

If Yes, the application shall be held in abeyance until a prosecutorial decision or a judicial determination has been rendered.

Q: Is the applicant in violation of or not compliant with this article or any other applicable law, including but not limited to Section 501.022, Florida Statutes?

Yes

No

If Yes, please provide more detail:

Q: Are there any other reasons related to the applicant's ability to meet the requirements of this Chapter or other applicable law or the health, safety and welfare of the city and its occupants?

Yes

No

If Yes, please provide more detail:

5. By signing below, applicant affirms the information provided hereto and recognizes that this permit may be revoked if the permit holder is found to have violated any part of this section after the issuance of the permit, or if the permit holder's required State permit has been suspended, revoked or has expired.

The applicant or the permittee shall have a right to appeal a decision to deny or revoke a permit. The appeal shall be on a form provided by the City Clerk and must be filed with the City Clerk within ten days of the decision. The appeal shall be heard by the City Manager. The hearing shall be conducted at a reasonable time and place, following notice of the hearing to the appellant. The hearing shall be informal, and the strict rules of evidence shall not be applicable, but the minimal requirements of due process shall be observed. The objective of the hearing shall be to determine whether the denial or revocation complies with the requirements of the Code. The decision of the city manager shall be final, and the applicant shall be deemed to have exhausted all administrative remedies.

By signing below, I verify this application includes no false or materially leading statements or information and that I have read and fully understand Chapter 62 in its entirety including prohibited acts and handbill provisions.

Signature of Applicant

State of Florida
County of Pinellas

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 2023.

Signature of Notary Public

Name of Notary, printed or stamped
Personally known _____ or produced information _____

Type of information produced _____