

CITY OF LIGHTHOUSE POINT DRAFT by  
Christine Speedy, modeled after Boca Raton

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Lighthouse Pt, FL 33064  
City Clerk's Office  
Code Enforcement & Licensing Division

Tele: 954-  
Fax: 954-

**APPLICATION FOR HOME BUSINESS TAX RECEIPT**

Application Date: \_\_\_\_\_ License No. \_\_\_\_\_

~ New Business ~ Change of Address ~ Change of Ownership ~ Other \_\_\_\_\_

Company Name \_\_\_\_\_

D/B/A \_\_\_\_\_ (Must supply proof of Fictitious Name Registration)

Business Address: \_\_\_\_\_ Boca Raton, FL \_\_\_\_\_

Mailing Address (if different from business address):  
(Street) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Telephone(\_\_\_\_)\_\_\_\_-\_\_\_\_ FAX No.(\_\_\_\_)\_\_\_\_-\_\_\_\_

Describe business activities that will be conducted at the home office): \_\_\_\_\_

\_\_\_\_\_

Federal Employment I.D. No. \_\_\_\_\_

State License No. \_\_\_\_\_ Expiration Date \_\_\_\_\_

HAVE YOU RECEIVED A NOTICE OF VIOLATION? Yes ~ No ~

IS THE COMPANY ENGAGED IN THE BUSINESS OF COMMERCIAL TELEMARKETING? Yes ~ No ~

IF YES, PROVIDE A COMMERCIAL TELEPHONE SELLER LICENSE OR EXEMPTION AS PER F.S. CH. 501:

LICENSE No. \_\_\_\_\_ OR EXEMPTION \_\_\_\_\_ (Attach proof of exemption).

# AFFIDAVIT FOR HOME OCCUPATIONAL LICENSE

Application is hereby made for a Home Business Tax Receipt, and I agree to meet the following criteria in the conduct of my home business:

1. Only the people who live at the dwelling shall work at the residence.
2. The business is clearly incidental and secondary to the use of the dwelling for dwelling purposes.
3. The activities of the home occupation shall occur entirely within the dwelling unit, excluding accessory structures such as garages, carports and sheds.
4. There shall be no external evidence of the existence of the home occupation within a dwelling unit. Signs, displays, off-street parking areas other than driveways normally required for residential use, or other advertising of any kind are prohibited.
5. No goods or services of any kind shall be sold or transferred to a customer, consumer or client on the premises of the home occupation, excluding facsimile machine, telephone and/or postal transactions.
6. The home occupation shall not create noise, vibration, glare, fumes, odors, dust, smoke or electromagnetic disturbances. No equipment or processes shall be used which create visual or audible interference in any radio or television receiver located nearby. No chemicals or chemical equipment shall be used except those that are used for domestic or household purposes.
7. Vehicular and pedestrian traffic shall not be generated by this home occupation in a greater volume or a different vehicle type than the traffic typical in any residential neighborhood in the City.
8. Deliveries of any kind required by and made to the premises of the home occupation shall not exceed one business delivery per day.
9. The City shall have the right to reasonably inspect the premises upon which the home insure compliance with the foregoing standards and conditions, and to investigate complaints, if any, from neighbors.
10. The applicant of the home occupation agrees to comply with the conditions imposed by the Department of Development Services to insure compliance with such standards.
11. Violation of these standards and conditions is deemed a violation of the City of LHP Code of Ordinances. Failure by the home occupation licensee to comply with the standards of this section and with the conditions imposed by the Department of Development Services shall be deemed a violation of the City of LHP Code of Ordinances.
12. The applicant for the home occupation acknowledges that a departure from any of these standards or conditions may result in a suspension or termination of the occupational license.

I HAVE READ AND AGREE TO THE STANDARDS AND CONDITION AS SET FORTH ABOVE. I AFFIRM THAT THE INFORMATION GIVEN ON THIS DOCUMENT IS TRUE. ANY INTENTIONAL MISREPRESENTATION ON THIS DOCUMENT SHALL BE CONSIDERED A FALSE OFFICIAL STATEMENT IN VIOLATION OF FLORIDA STATE STATUTE 831.02 AND SHALL BE PROSECUTED ACCORDING TO LAW.

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Date)

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 2008 by

\_\_\_\_\_ who is personally known to me or has produced identification.  
(Name of Person)

\_\_\_\_\_  
(Type of Identification)

\_\_\_\_\_  
(Notary Public Signature)

Notary Public Seal

\_\_\_\_\_  
(Printed Name of Notary)

(OATH ADMINISTERED BY)