



City of Cooper City

Local Business Tax Receipt: Introduction Additional Professional

Dear business owner,

Welcome to the City of Cooper City! As the Building Department, we wish to inform you that we will be guiding you through the Local Business Tax Receipt process.

As per Florida Statutes Chapter 205, "The governing body of an incorporated municipality may levy, by appropriate resolution or ordinance, a business tax for the privilege of engaging in or managing any business, profession, or occupation within its jurisdiction." For a more detailed description of the process, please feel free to read Florida Statutes, Chapter 205 and also the City of Cooper City's Code of Ordinances, Chapter 9.

Outlined below are the different departments involved in reviewing and approving Local Business Tax Receipt applications, although, please keep in mind that Home-based businesses will only be reviewed by the Police Department.

BUILDING DEPARTMENT

Aside from assisting with the Local Business Tax Receipt submittal process, the Building Department is also involved in the building permitting and inspection process. The inspection process includes Pre-Inspections, which all commercial locations are subject to; if occupying a previously leased commercial space.

For any inquiries on the Building Department's involvement on the matter please contact:

City of Cooper City: Building Department
(954) 434-4300, option 5
BizTax@CooperCityFL.org

PLANNING & ZONING DEPARTMENT

The Planning and Zoning Department reviews Local Business Tax Receipt applications to ensure that the applying businesses meet the permitted use of the proposed commercial locations. The Planning and Zoning Department is also involved in the review of some Commercial Building Permits such as permits for signs and commercial exterior projects.

For any inquiries on the Planning and Zoning Department's involvement, please contact:

Jason Chockley
(954) 434-4300, Ext: #226
JChockley@coopercityFL.org

FIRE DEPARTMENT

The Broward Sheriff's Office assists the City of Cooper City's Local Business Tax Receipt process by ensuring the safety of our local business owners, employees, and customers by performing commercial Pre-Inspections and Annual Fire Inspections. These inspections cover both profit and non-profit commercial organizations. These Fire Inspection costs are collected through the Tax Receipt process, even if the organization is exempt from paying the Tax Receipt fee. If interested in BSO's Fire Fee Schedule, please feel free to review Section 43.55 of Part XIII of the Broward County Administrative Code.

For any inquiries on the Fire Department's role with the Tax Receipt process please contact:

Reyna Varela

Administrative Specialist II
(954) 432-8905
Reyna_Varela@sheriff.org

Roger Gonzalez

Broward Sheriff's Office - Fire Inspector
(954) 432-8905
Roger_Gonzalez@sheriff.org

On behalf of all our participating departments, we would like to thank you for your involvement in the Local Business Tax Receipt process and would like to sincerely wish your business the best.

Sincerely,



City of Cooper City
Building Department



City of Cooper City

Local Business Tax Receipt Checklist: Additional Professional

As per City of Cooper City Code, Sec. 9-4: A separate and additional business tax receipt shall be required for each category of business run out of any single location, and for each person engaged in such occupation or profession at such location. Receipts, when issued shall be for a one year period, beginning October 1 and ending the following September 30, or for any portion of said time period.

Illegible or incomplete applications will not be accepted. If possible, please download and digitally fill out the PDF version of the application, and its corresponding documents, available online at <http://www.coopercityfl.org/>.

- ☞ An appointment is required for Local Business Tax Receipt submittals. Appointment set-ups and inquiries can all be forwarded to **(954) 434-4300 Ext: option 5** and/or **BizTax@CooperCityFL.org**.
- ☞ Submittals must be performed in-office at **9090 SW 50 Place Cooper City, FL 33328**.
- ☞ If applicable, a copy of the up-to-date **ARTICLES OF INCORPORATION**. Can be retrieved and printed at <http://www.sunbiz.org/search.html>.
- ☞ If applicable, a copy of the up-to-date **FICTITIOUS NAME REGISTRATION**. Can be retrieved and printed at <http://www.sunbiz.org/search.html>.
- ☞ A copy of the **DRIVER'S LICENSE and/or any other government issued ID** for the professional.
- ☞ If applicable, a copy of required **STATE LICENSURE/CERTIFICATIONS**.
- ☞ If applicable, a copy of the professional's **FEDERAL ID NUMBER (FEIN)**. If an FEIN Number is not available, the professional's Social Security Number may be used in its place.

Upon completion and submittal of all required documents, your application will be sent to the Police, Fire, Zoning, and Building Departments for approval. You may be contacted by any of these department officials if additional information is required.



Local Business Tax Receipt Application

New: Commercial
Transfer of Location
Additional Business Line

New: Home/Restricted
Transfer of Ownership
Business Name Change

Exempt
Expansion
Additional Professional

Business Name:			
Fictitious Name:			
Type of Organization:	<input type="checkbox"/> Corporation	<input type="checkbox"/> LLC	<input type="checkbox"/> Partnership
	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Other	
FEIN Number:		Number of Employees:	

Business Address:			Sq. Feet:	
Address:			Suite(s):	
City:		State:	Zip Code:	
Business Telephone:				
Business E-Mail:				
Business Website:				

Mailing Address:			
Address:		Suite(s):	
City:		State:	Zip Code:

Please describe business operations. If space is insufficient, please attach a *Business Description Affidavit*.

Community Assembly Addendum required? Yes No

- Required for organizations that hold instructional use classes, events, banquet halls, church services, etc.

1	Owner/Officer's Name:		Owner's Telephone:		
	Owner/Officer's Address:			Suite:	
	City:			State:	
	Owner/Officer's E-Mail:				

2	Owner/Officer's Name:		Owner's Telephone:		
	Owner/Officer's Address:			Suite:	
	City:			State:	
	Owner/Officer's E-Mail:				

3	Owner/Officer's Name:		Owner's Telephone:		
	Owner/Officer's Address:			Suite:	
	City:			State:	
	Owner/Officer's E-Mail:				

4	Owner/Officer's Name:		Owner's Telephone:		
	Owner/Officer's Address:			Suite:	
	City:			State:	
	Owner/Officer's E-Mail:				

5	Owner/Officer's Name:		Owner's Telephone:		
	Owner/Officer's Address:			Suite:	
	City:			State:	
	Owner/Officer's E-Mail:				

6	Owner/Officer's Name:		Owner's Telephone:		
	Owner/Officer's Address:			Suite:	
	City:			State:	
	Owner/Officer's E-Mail:				

Former Business Owner's Name and Former Business Location (If Applicable):

Former Business Owner's Name:					
Former Business Address:			Suite:		
City:			State:	Zip Code:	

I certify that the foregoing answers are true to the best of my knowledge and understand that this application is not an authorization to open any business until the receipt herein applied for is issued:

Signature: _____ **Date:** _____

(Note: If signed by someone other than a registered owner, officer, or agent, please attach a Letter of Authorization in which the signee is authorized to sign and edit Local Business Tax Receipt documentation on behalf of the organization.)