

### City of Pompano Beach

Department of Development Services Business Tax Receipt Division

**Modified:** 8.23.2017

100 W. Atlantic Blvd Pompano Beach, FL 33060 Application for BTR for Rental Property Phone: 954.786.4654 Fax: 954.786.4666 Email: Linda.cebrian@copbfl.com

Owner's Name (s)					Date									
Type of Ownership: Corporation LLC					Part	Partnership Sole Proprietor			cor					
Owner's So	ocial Secu	urity 2	XXX-X	XX			<u>OR</u>	O	wner'	s FEIN#				
Address of	the Prope	erty _									Zip			
Type of Re	ntal Unit:	Sin	gle-fai	mily Home	e	Duplex		Triplex/	Four	plex	Condo/	Townhome		
Name of A	pplicant _													
Mailing AddressCity							_State		Zip					
Business Pl	none					Hom	e Phor	ne						
E-Mail Add	lress													
herein set fo whether spec public record revocation o	rth inform cified or n d. Giving f your Bu	nation ot and false i siness	with th l all inf nforma Tax R	ne understar formation soution on this eceipt.	ndin uppl s ap	•	y of Po pplicati nlawfu	mpano B on (other and may	each ( than y resu	Ordinances social secu It in prosec	shall be rity numl ution, sus	complied with ber) shall become		
Owner, Part	ner, or Co	rporat	e Offic								rporate (	Officer's Signature		
Transfer of:	Name		0	FOR STAFF	USE	ONLY (DO NO	T WRIT	E BELOW '			Ca	4		
Transferred Account No.:				shin	Ad	ldress	New		entory	increase	hip Address New Inventory Increase Category char  Transferred License No.:			
Transferred			Owner	rship	Ad	1	New Licens	Inve	entory	increase		tegory change		
Transferred Zoning Distr	Account N			by: Cash	Ad	1		Inve		Date Paid:	•	Receipt No.:		
Zoning Distr	Account Nrict:	No.:	Paid	by: Cash		Transferred Check No.	Licens	Inve		Date Paid:				
Zoning Distr	Account Nrict: escribed been	No.:	Paid in com	by: Cash	use	Transferred Check No. requirements	Licens	Inve	which t	Date Paid:	s proposec	Receipt No.:		
Zoning Distr The above d business has determined t	Account Nrict: escribed been o be Category	No.:	Paid in comp	by: Cash	use	Transferred Check No. requirements	Licens	Inve	which t	Date Paid:	s proposec	Receipt No.:		
Zoning Distr The above d business has determined t	Account Nrict: escribed been to be Category Ord. No.	No.:	Paid in comp	by: Cash	use	Transferred Check No. requirements	Licens	Inve	which t	Date Paid: he activity is n which the ant Number:	s proposec	Receipt No.:		
Zoning Distr The above d business has determined t	Account No.  Account No.  Account No.  Account No.	No.:	Paid in com	by: Cash	use	Transferred Check No. requirements	Licens	Inve	which t	Date Paid: he activity is n which the	s proposec	Receipt No.:		
Zoning Distr The above d business has determined t	Account Notice:  escribed been to be  Category Ord. No.  Zoning For Adminis	No.:	Paid in com	by: Cash	use	Transferred Check No. requirements	Licens	Inve	which t	Date Paid: he activity is n which the ant Number: g Official:	s proposec	Receipt No.: It to be located.  proposed to be		
Zoning Distr The above d business has determined t	Account No.  Account No.  Account No.  Account No.	No.:	Paid in composition in composition in composition in collected and the control in contro	by: Cash	use	Transferred Check No. requirements	Licens	Inve	which t	Date Paid: he activity is n which the ant Number:	s proposec	Receipt No.: It to be located.  proposed to be		
Zoning Distr The above d business has determined t	Account Notice:  escribed been o be  Category Ord. No.  Zoning For Administ Penalty I	V: : Fee: trative Fee: Tax l	Paid in composition in composition in composition in collected and the control in contro	by: Cash	use	Transferred Check No. requirements	Licens	Inve	which t	Date Paid: he activity is n which the ant Number: g Official:	s proposec activity is	Receipt No.: It to be located.  proposed to be		
Zoning Distr The above d business has determined t	Account Notice:  escribed been to be  Category Ord. No.  Zoning For Administration Penalty In Business	No.:	Paid in composition in composition in composition in collected and the control in contro	by: Cash	use	Transferred Check No. requirements	Licens	Inve	which to strict in Account Zonin Busin	Date Paid: he activity is n which the ant Number: g Official:	s proposec activity is	Receipt No.: I to be located. proposed to be		



# City of Pompano Beach Department of Development Services Planning & Zoning Division

100 W. Atlantic Blvd Pompano Beach, FL 33060 **Phone:** 954.786.4654 **Fax:** 954.786.4666

## Zoning Use Certificate RENTAL HOUSING \$30.00 Processing Fee

- Approval of a Zoning Use Certificate does not give you permission to open for business.
- You must complete a Business Tax Receipt application and pay the appropriate fees before opening for business.
- Approval of a Zoning Use Certificate is only good for 60 days, after which you must re-apply and pay a new fee

7 .pp. 0 : a: = 0 : 9		ala Caraila Haran	,		puj u			
Type of Rental Unit	(1)	gle-Family Home ndo / Town House		Duplex Triplex/ Fourplex				
Applica				Rental Property Information				
Print Name and Title	Аррпсат	10	Name of Business (or Sole Proprietor)					
					,			
Street Address			Street Ac	Street Address				
Mailing Address City	/ State/ Zip	Mailing Address City/ Sta			te/ Zip			
				<u> </u>				
Phone			Phone					
Number			Number					
Fax Number			Fax Number					
Email			Email					
			l e e e e e e e e e e e e e e e e e e e					
Signature						Date		
		ontact person / Loc						
-		naintain a residence (	-	•	ness within the			
Print Name and Title	or Paim Be	each, Broward or Miai	mi-Dade Col	unties.				
Name of Business (if								
Mailing Address City	/ State/ Zip							
Email								
Phone Number								
	FOR STA	AFF USE ONLY (DO N	OT WRITE E	BELOW THIS L	NE)			
Zoning District:		oy: Cash Check N refundable)	0	Date Paid:	Receipt No.:			
The above described business	in comp	in compliance with use requirements of the district in which the activity is proposed to be						
has been	located.	cated.  ot in conformance with the use requirements of the district in which the activity is proposed.						
determined to be to be located.								
Additional comments:								
Reviewed by:		Approved:	Date:	Date: Date Applicant				
		Denied:						



#### City of Pompano Beach Department of Development Services Planning & Zoning Division

100 W. Atlantic Blvd, Pompano Beach, FL 33060 **Phone:** 954.786.4654 **Fax:** 954.786.4666

## ZONING USE CERTIFICATE RENTAL HOUSING AFFIDAVIT

#### AFFIDAVIT: DWELLING UNIT OCCUPANCY

State of Florida} County of Broward}				
	ava tha		af th	a a manarti.
I(Print Name)	am the(Pro	perty Owner or L	or in .ocal Designated Representative.	ne property ve)
located at			f Pompano Beach, FL.	,
(Address)			•	
I acknowledge that I have been Ordinances <b>Chapter 153</b> , pertainin Code of Ordinances <b>Chapter 153</b> , a	g to Rental Housing.	I agree that the	property listed above shall be	
I acknowledge that I have been a <b>Article 9</b> pertaining to the definit compliance with the <b>Zoning Coc</b> pursuant to other provisions of the	ion of "Dwelling Unit" de Article 9 definitio	' and "Family". I ons of "Dwelling	agree that the property listed Unit" and "Family", unless of	d above shall be in
Zoning Code Article 9  Dwelling Unit - "A room or comb habitable unit that contains indep facilities), and that is used or designit" shall also include a habitable of six or fewer unrelated persons of handicapped person (Fla. Stat. §7 ill person (Fla. Stat. §394.455), of services (Fla. Stat. §984.03 or §9 necessary to meet the physical, en	endent living, sleeping gned for occupancy of unit licensed by the who meet statutory de (60.25), developments child determined to b (85.03), and that may	ng, and sanitation a weekly or lo state to provide efinitions of a fra ally disabled per be dependent (F include such su	on facilities (and may or may in facilities (and may or may in family be a family living environment a fill elder (Fla. Stat. §429.65), proson (Fla. Stat. §393.063), non-fla. Stat. §39.01 or §984.03), upervision and care by support	not contain cooking. The term "dwelling and care for a group hysically disabled or dangerous mentally or child in need of
<b>Family -</b> "An individual or two or court-approved adoption—or up to				
BEFORE ME, the undersigned being duly sworn, deposes ar information I have provided about	nd says: <i>That I am</i>	the person w	rhose signature appears be	IT NAME) who after alow, and that the
		Signature:		
SWORN TO AND SUBSCRIBED County, Florida.	before me this	day of	20, in Pompa	ano Beach, Broward
Notary Public Seal of Office			Notary Public, State of Florid	 a
			(Print Name of Notary Public	)
			Perso	onally Known
			Produced	Identification
			Type of identification Produce	ed:

#### § 113.41 RENTAL HOUSING.

- (A) The owner of every rental structure, structures containing a rental unit or units, or individually owned units, which are utilized as a dwelling for residential living purposes must obtain a business tax receipt for each rented structure or unit, including, but not limited to, single-family homes and condominium units, when the structure or any portion thereof is rented and not owner-occupied. All such rental structures and rental units shall comply with all minimum standards in <a href="Chapter 153">Chapter 153</a>: Rental Housing Code.
- (B) All rental units and structures utilized as residential dwellings shall comply with all designated permitted lawful uses for the zoning district in which the rental unit or structure is located as set forth in <a href="Chapter 155">Chapter 155</a>: Zoning Code, and the use of said property for rental purposes shall not alter any such permitted uses.
- (C) (1) All residential dwelling rental structures and rental units shall be subject to inspection by the city's Code Inspectors for compliance with all applicable Zoning, Building, Housing and Fire Code requirements, and for compliance with all requirements for rental housing in <a href="Chapter 153">Chapter 153</a>.
- (2) Whenever a property containing a rental residential dwelling is sold or otherwise changes ownership, the new owner must:
  - (a) Apply for a new business tax receipt; and
- (b) For any rental single-family home, schedule and obtain an inspection of the home by the city's Code Inspectors, to ensure compliance with all applicable Zoning, Building, Rental Housing and Fire Codes, and that all uses of the property are lawful and permitted. This inspection shall be required within 60 days of application as part of the application process for issuance of the new business tax receipt. Failure to obtain and pass such inspection shall be grounds for revocation of any business tax receipt issued. No fees paid for any business tax receipt shall be refunded upon any such revocation.

(Ord. 2007-57, passed 7-10-07; Am. Ord. 2008-47, passed 6-24-08, Am. Ord. 2014-09 passed 12-10-13)