



**CITY OF HOLLYWOOD, FLORIDA**  
**APPLICATION FOR LOCAL BUSINESS TAX RECEIPT**  
**FOR RESIDENTIAL RENTAL PROPERTIES**  
**(SINGLE-FAMILY, CONDO, DUPLEX AND TOWNHOME)**

Owners of leased or rented residential properties are required to obtain a local business tax receipt (formerly occupational license). Please complete this application form and return it along with your check, made payable to the City of Hollywood to: Treasury Services Division/Local Business Tax Department, City of Hollywood, 2600 Hollywood Blvd., Room 103, Hollywood, Florida 33020. The annual business tax for each single-family, condo, duplex or townhome is \$61.00 and there is a non-refundable application fee of \$25.00. The total amount due for each leased or rented single-family, condo, duplex or townhome property is \$86.00. Please call Customer Service at (954) 921-3225 Monday through Friday, between 8 am to 5 pm, if there are any questions. Thank you.

**PART A: OWNER INFORMATION**

1) OWNER'S NAME: \_\_\_\_\_

2) Owner's Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Email Address: \_\_\_\_\_

3) Owner's Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**PART B: HOLLYWOOD CONTACT INFORMATION (TO BE COMPLETED BY OWNER/DESIGNEE PER CITY CODE OF ORDINANCES)**

Does owner resides in the City of Hollywood? \_\_\_\_\_ Yes \_\_\_\_\_ No. If No, please provide the following:

1) Name of a person residing in Hollywood: \_\_\_\_\_ Address: \_\_\_\_\_

2) Phone number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**PART C: PROPERTY INFORMATION**

1) Address of rental property for which application is being made: \_\_\_\_\_

2) Single Family \_\_\_\_\_ Duplex \_\_\_\_\_ Condo \_\_\_\_\_ Townhome \_\_\_\_\_ (Check one)

3) Do you own additional rental or commercial properties in the City of Hollywood? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, list addresses: \_\_\_\_\_

**PART C: OWNER ATTESTATION AND SIGNATURE**

I am the owner of the rental property specified above, and understand that further proof of ownership may be required by the City. The information provided above is true and correct to the best of my knowledge. I understand that the City will issue a local business tax receipt to me only after proper review of my application and any investigation deemed necessary, and only after payment of the appropriate tax and non-refundable application fee. I understand that issuance of a local business tax receipt does not release me from responsibility for compliance with any related City, County, State or Federal laws applicable to my business or premises.

Signature of Owner or Authorized Signer: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

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**Office Use Only:**  
**Received By:** \_\_\_\_\_  
**Date:** \_\_\_\_\_