



CITY OF BELLEVIEW

City with Small Town Charm

www.belleviewfl.org

Development Services

5525 SE 119th St.

Belleview, FL 34420

Office: 352-245-7021

Email: DSStaff@belleviewfl.org

Business Tax Receipt Update Form

Please Complete All Applicable Fields

If an e-mail address is provided, your Local Business Tax Receipt will be sent to you via e-mail upon issuance.

Business Name: _____

Business Telephone Number: _____

Business Address: _____

Mailing Address: _____

Owner Name: _____

Owner Telephone Number: _____

Email Address: _____

Gross Square Footage: _____

Number of Employees: _____

Number of Restaurant Seats/Beauty or Barber Stations (If Applicable): _____

Number of Rooms/Apartments/Rental Units (If Applicable): _____

Business Hours: _____

Alarm System: _____ No _____ Yes If Yes, what type _____

Direct _____ Telephone Dialer _____ Audible _____ Other _____

Federal ID (EIN) #: _____

State License # (If Applicable): _____

Solid Waste Carrier (Required if inside Belleview City Limits): _____

Emergency Contacts

Name: _____ Telephone: _____

Name: _____ Telephone: _____

****VENDING MACHINE COMPANIES MUST PROVIDE A LIST OF MACHINE LOCATIONS AND NUMBER OF MACHINES AT EACH LOCATION.****