

**City of Coleman**  
**BUSINESS TAX RECEIPT**  
**APPLICATION**

**BUSINESS INFORMATION**

\_\_\_\_\_  
Business Name (as it is to appear on the receipt)

\_\_\_\_\_  
Mailing Address (if different from physical location)

\_\_\_\_\_  
Physical Address of Business

\_\_\_\_\_  
Mailing Address line 2

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Federal Employer Identification Number (FEIN/  
Individual Tax Identification Number (ITIN))

\_\_\_\_\_  
Business Phone Number

\_\_\_\_\_  
Alternate Phone Number

\_\_\_\_\_  
Primary Function of New Business

\_\_\_\_\_  
Email Address

**OWNER(S) INFORMATION**

\_\_\_\_\_  
Individual's Name or Business Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
E-Mail

\_\_\_\_\_  
City, State, Zip Code

General Information

Is this a home based business? Yes \_\_\_\_\_ No \_\_\_\_\_

Maximum number of employees, including business owner of officers: \_\_\_\_\_

Hotel, Motel & Public Lodging Establishment – Number of rooms: \_\_\_\_\_

Cafes, Restaurants and other eating establishments – Number of seats: \_\_\_\_\_

Fuel Station – Number of pumps: \_\_\_\_\_

Vending Machines – Number of machines: \_\_\_\_\_

Inventory Amount: \_\_\_\_\_

**\*\* Paint and Body Shop, garage, repair or storage and car wash: - \$1,000.00 in merchandise requires a Merchant’s license.**

**\*\*\* If Your Business Tax Application is for Property Management, please indicate if it is for Commercial or Residential, also please list the address(es) on the back of this page.**

**OATH**

After reviewing the information I provided above, and under penalty of perjury, I declare that the information is true and correct.

I acknowledge that a Business Tax Receipt issued pursuant to this registration does not waive my Responsibility to adhere to any City or County Ordinance, Zoning and/or Regulations; any State Statute and Or State Regulations; or any Federal Regulations applicable to my business. I swear or affirm that the Business activities for which this receipt is issued are not prohibited by any City, County, State, or Federal Ordinance, Resolution, Regulation, Code of Law in Sumter County.

Prior to conducting any business or installing any sign, I hereby agree to verify with Sumter County Planning & Zoning Division that the parcel upon which my business is located is properly zoned for my intended Business activity, and failure to do so may result in Code Enforcement action including fines and penalties as Prescribed by law.

\_\_\_\_\_  
Signature of Owner, Designee or Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

