

**APPLICATION FOR BUSINESS TAX EXEMPTION
FOR
VETERANS, SPOUSES OF VETERANS AND CERTAIN SERVICEMEMBERS, AND
LOW-INCOME PERSONS**

Account #

I, _____, hereby certify that:

1. I am (make a selection below):

- (a) A veteran of the United States Armed Forces who was honorably discharged upon separation from service, or the spouse or un-remarried surviving spouse of such a veteran, as verified by providing one of the following:
- DD Form 214, Certificate of Release or Discharge from Active Duty, issued by the United States Department of Defense
 - Veteran Identification Card, issued by the United States Department of Veterans Affairs pursuant to the Veterans Identification Card Act of 2015, Pub. L 114-31
 - Valid Florida Driver License or Florida Identification Card with the "Veteran" designation
- (b) The spouse of an active duty military service member who has relocated to this county or municipality pursuant to a permanent change of station order, as verified by providing:
- Military Permanent Change of Station (PCS) orders
- (c) A person who is receiving public assistance as defined in Fla. Stat. §409.2554, as verified by providing:
- Proof of enrollment in the Department of Children and Families' Access Florida Benefits Program. (Access cards must have valid dates shown)
- (d) A person whose household income is below 130 percent of the federal poverty level based on the current year's federal poverty guidelines, as verified by providing:
- Tax return from last tax year

2. I claim exemption from the payment of County Business Tax under the provisions of Fla. Stat. §205.055.

3. The business or occupation for which I desire a Business Tax Receipt is fully described on the attached application form and that such business or occupation is carried on mainly through my personal efforts as a means of livelihood.

4. **COMPLETE ONLY IF APPLICABLE** : I own a majority interest in a business with fewer than 100 employees. As I am exempt from the payment of the County Business Tax for the reason set forth in Question 1 above, I claim an exemption from the payment of the County Business Tax for this business as well.

5. Prior to requesting a renewal of said Business Tax Receipt, I will notify the Tax Collector should I no longer qualify for the exemption.

UNDER PENALITIES OF PERJURY, I DECLARE THAT I HAVE READ THE FORGOING DOCUMENT
AND THAT THE FACTS IN IT ARE TRUE AND CORRECT.

Signature of Applicant