



Occupational License Tax Application

City of Archer

P.O. Box 39

Archer, FL 32618

Tele # 352-495-2880

Fax # 352-495-2445

Please complete and return for Occupational License. License fees shall be payable on or before October 1st of each year. Exemptions are given to certain persons, including but not limited to, disabled persons, widows or widowers with minor dependents, people 65 years of age or older and disabled veterans, if criteria is met. Call (352) 495-2880 for more information.

Please print or type:

Business Name _____ Owner(s) _____

Business Address _____ Parcel Number _____

Mailing Address _____ City _____ State _____ Zip _____

Business Phone _____ Home _____ Cell _____

Type of Business (be specific) _____

Fictitious Name _____ (copy of registration of fictitious name to be attached) or a written statement which sets forth the reason that the applicant need not comply with the Fictitious Name Act.

Emergency Information

List two names with addresses, telephone numbers for after hours emergency contact.

1. _____

2. _____

Does your business use or generate hazardous materials or hazardous waste such as petroleum products, solvents, fertilizers, laboratory chemicals, used oil, paint waste, film developing waste, etc? **YES** or **NO** (please circle and attach list of materials to application).

Does your business use a _____ Aboveground or _____ Underground fuel storage tank system? **YES** or **NO** (Please, check one).

Past due penalties will be added after October 1st of each year, failure to pay the Occupational Tax by this date will be subject to a delinquency penalty of 10% for the month of October, plus an additional 5% for each month thereafter until paid (not to exceed 25% of the occupational license fee). Application cost is \$30.00. If later than Sept 30 and additional fee of (\$3.00 in Oct., \$4.50 in Nov., \$6.00 in Dec., \$7.50 in Jan.). Other penalties may apply.

I understand I am paying an Occupational Tax only and that I must meet all applicable requirements before I can legally operate a business, profession or occupation.

Signature _____ Title _____ Date _____

To obtain your Occupational License for the City of Archer, per State Statute 205, all business must provide a Federal Employer Identification number (FEIN) or a Social Security Number from the person to be licensed.

This information will be kept confidential.

Business Name: _____

Owner's Name: _____

Federal Employer ID: _____

Social Security: _____