

New Plan Number: _____

Amount of Fee Due: **\$45.00 Application Fee**

Last City License # for This Address: _____

Make Check Payable to: **CITY OF MIAMI BEACH**

City of Miami Beach

Certificate of Use (CU), Annual Fire Inspection Fee & Business Tax Application

This application is NOT your business tax receipt. Do not operate the business until the Certificate of Use and the Business Tax Receipt are issued.

The place of business must be available to all inspectors.

Type of Application:

New Business Change of Owner Adding Seats Additional Occupation Change of Location

Application Checklist

Federal ID No. Fictitious Name Registration Lease/Deed/Closing Statement
 Articles of Inc (if applicable) State License (if applicable) CU and Annual Fire Fee (non-refundable)
 Bill of Sale Insurance

Does the Application Involve: Change of Use Renovation (Provide Certificate of Occupancy Process Number _____)

A Change of Use may generate additional building and fire code requirements as applied to new construction.

A valid Certificate of Occupancy is required before an occupational license can be issued.

Is the Business one or more of the following types:

Apartment Building Condominium Hotel Restaurant Bakery
 Ice Cream Parlor Delicatessen Nightclub Dancing/Entertainment Real Estate
 Hair Salon Home Based Business Health club Promoter Valet
 Escort Service Janitorial Service Mail Order Pre-Package Food Motor Scooter
 Retail Alcohol Sales Travel (sales) Mobile Caterer Alcoholic Beverage Establishment
 Beach Front Concession Machine Distributor

Is the Business one of the following types:

Adult Congr Liv Facility Day Care Nursing Home Religious Institution School
 Parking Lot /Garage Outdoor Entertainment Open Air Entertainment Pawnshop Warehouse
 Video Game Arcade Gasoline Sales Restaurant Alcoholic Beverage Establishment

Business Name _____

Application Date: _____

Location _____

Lease _____ Own _____

Type of Business (be very specific) _____

Hours of Operation _____

Hours Serving Alcohol _____

Name of Owner /President _____ Date of Birth _____

DL# _____ St. _____

Federal ID # _____ SSN _____

Home Address _____ City _____ State _____ Zip _____

Home Phone _____ Business Phone _____ Cell Phone _____

Email Address _____

Send Business Mail to Attention of: _____ Business Phone _____

Address _____ City _____ State _____ Zip _____

Name of Emergency Contact _____ Phone _____

Is the Business a:

Hotel or Apartment? If yes, how many units? _____ # of washers/dryers (if owned) _____

Restaurant? How many seats inside? _____ How many seats outside? (private property only) _____
 If there will be seats outside on public property (sidewalk), then a Sidewalk Cafe Permit is required.
 Hours of Alcohol Sales _____ (Zoning Review for # of chairs)

Office or Retail Establishment? If yes, approximate sq. ft. _____
 If Retail, what is the inventory value? General \$ _____ Food \$ _____ Liquor \$ _____

Hair or Nail Salon? If yes, number of seats _____

Motor Scooter Rentals? If yes, number of scooters _____

A Miami-Dade County Business Tax Receipt is also required. See "Miami Dade County Business Tax for more information."

Contact the Planning Department for a Sign Permit which is required for fill signage.

Any person who, in applying for a business license in the City of Miami Beach, who shall make a false statement and/or fail to disclose and/or misrepresent the information requested shall be subject to penalties authorized by City Code Section 102-375.

I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO FOLLOW-UP ON THE APPROVAL PROCESS FOR THIS APPLICATION TO FOLLOW-UP PLEASE CONTACT, (305) 673-7420

I HAVE READ THIS APPLICATION AND I DO FREELY AND VOLUNTARILY CONFIRM THAT THE STATEMENTS AND INFORMATION CONTAINED THEREIN ARE TRUE AND CORRECT.

 Print Name

 Signature

 Date

Official Use Only: Review by the following Departments may be required:

Department	Required? _:yes _no	By _____	Date _____	Comments _____
Planning & Zoning	Required? _:yes _no	By _____	Date _____	Comments _____
Concurrency	Required? _:yes _no	By _____	Date _____	Comments _____
Building	Required? _:yes _no	By _____	Date _____	Comments _____
Fire	Required? _:yes _no	By _____	Date _____	Comments _____
Parking	Required? _:yes _no	By _____	Date _____	Comments _____
Risk Management	Required? _:yes _no	By _____	Date _____	Comments _____
Public Works	Required? _:yes _no	By _____	Date _____	Comments _____
Finance	Required? _:yes _no	By _____	Date _____	Comments _____
Code	Required? _:yes _no	By _____	Date _____	Comments _____

Notes/Comments _____

Business Tax Receipt Procedures:

1. Submit Business Tax Receipt Applications to the Finance Department/Customer Service Center located 1755 Meridian Ave, 1st Floor, Miami Beach, FL 33139. Apply and check status via **Citizen Access Portal (CAP)** at the official City website:
<https://eservices.miamibeachfl.gov/EnerGovProd/CitizenAccess/Site/Public/Main>
2. In the License description, please include **Unit #**, if any with the address
3. For records, contact the Finance Dept. for previous license information or contact the Records Dept. to request copies of plans and other documents. Records Dept. is located on the 2nd Floor of the Building Dept.
4. Finance Department will route the application to the approving departments for review (Planning/Building/Code Enforcement). If a site inspection is required, customer to contact the designated inspector at the Fire Dept.
5. When all reviews and inspections are completed, the results can be viewed in CAP online. If all reviews are approved, the final process and notification will be completed by the Finance Dept.
6. **For status updates, customers can check, Citizen Access Portal (CAP). Click on PLAN under “Access information pertaining to your plan cases”. If any review fails and you wish to read the comments, have Finance link your license to your CAP account, so they can become visible.**

If a review or an inspection fails, each reviewing department staff enters the comments in the system. The applicant may view results using CAP online and/or contact the following staff respectively. When the correction(s) have been addressed, the applicant may contact Customer Service at the Finance Department to initiate a second review workflow and/or to re-schedule another Fire Department site inspection if that had failed.

Please allow 3-5 business days for the review process. After that, if the Customer needs specific information on failed Review(s) or Inspection comments, please contact the following staff respectively, as they can only help you within their own trade:

If you have any questions related to the Business Tax Receipt process, or cannot access your review status (or comments) online, please contact: CUSTOMER SERVICE CENTER – 305.673.7420

Fire Department: 305-673-7123

Planning & Zoning Department: 305-673-7550

Code Compliance Department: 305-673-7555

Building Department: 305-673-7610

1700 Convention Center Drive, 2nd Floor at **ADMINISTRATION**

BTR Hours from: 2:00PM - 4:00PM - Please email for an appointment

Gabi Chamoun at Ext: 6648

Antonio Gonzalez at Ext: 6716

E-mail: GabiChamoun@miamibeachfl.gov

E-mail: AntonioGonzalez@miamibeachfl.gov