



DEVELOPMENT SERVICES DEPARTMENT

P.O. Box 3366
West Palm Beach, Florida 33402
Telephone: 561-805-6700

Date: _____
Name: _____
Address: _____
City.State.Zip: _____

RE: **City of West Palm Beach Business Tax Receipt – Mandatory Update of Information Required**

Dear Business Owner:

The City of West Palm Beach Ordinance #82-148 (see code section below) requires that wholesale and retail businesses be assessed a business tax receipt based upon inventory.

Sec. 82-148. Affidavits as to amount of stock in trade, number of rooms, etc., required in certain cases.

Whenever the amount of the business tax applied for depends upon the amount of stock in trade carried by the applicant for a receipt under this article, or the number of rooms in a hotel or rooming house, or any other facts not within the personal knowledge of the business tax official, no receipt shall be issued until the applicant therefore has made and filed with the business tax official an affidavit, duly authenticated, setting forth the amount of his stock in trade, number of rooms in his hotel or boardinghouse or other facts upon which the amount of such business tax depends.

(Code 1979, § 18-27; Ord. No. 4006-06, § 1, 12-18-2006)

This information is required to be updated on an annual basis prior to renewal notices being mailed in August. In order that we may update your business record, you are required to provide the business average inventory at cost for the past 12 month period on the attached form no later than June 1, 2016 to:

City of West Palm Beach
Development Services Dept.
P O Box 3366
West Palm Beach, FL 33401

Sincerely,

Richard Greene
Development Services Director

INVENTORY AFFIDAVIT

Business Name: _____ Business Account # _____

Business Address: _____ Business Inventory At Cost \$ _____

I affirm the above information is correct.

Signed _____ Date _____

Telephone # _____

The foregoing instrument was acknowledged before me this ____ day of _____ 20__

who is personally known to me or who has produced _____ as identification and who

did/did not take an oath.

AFFIX NOTARY SEAL IN BOX BELOW

Notary Signature _____

Notary Printed Name _____

