

## 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. In order that we may update your business record, you are required to provide the amount of inventory at cost on the attached form no later than June 30, 2024 to:

In order to accurately assess the reported value of inventory, the Development Services Department may require that you provide supplemental materials such as, but not limited to: Schedule L of IRS Tax forms 1120, 1120S, 1065 or Schedule S of IRS Tax Form 1040; internally prepared or audited financial statements or appraisals. Sincerely,

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

West Palm Beach, Florida 33402

Jonathon Marchant

License and Permit Supervisor

## INVENTORY AFFIDAVIT

Business Name:	Business Account #		
Business Address:	Business Inventory At Cost \$		
I affirm the above information is correct.			
SignedDate			
Telephone #			
State of County of			
The foregoing instrument was acknowledged before me thisday of20			
who is personally known to me or who has producedas identification and who			
did/did not take an oath. AFFIX NO	TARY SEAL IN BOX BELOW		
Notary Signature			
Notary Printed Name			