

**CITY OF HOLLYWOOD, FLORIDA**  
**TREASURY SERVICES DIVISION - LOCAL BUSINESS TAX**  
**RESIDENTIAL RENTAL PROPERTY APPLICATION**

Owners of leased or rented residential property are required to register for a local business tax account. Properties with 5 or more units require a license issued by the Florida Department of Professional Regulations. **Notwithstanding the prior issuance of a local business tax receipt, City Code also requires that before commencing use of any property, other than single-family residential, a Certificate of Use Permit is issued by the Department of Planning and Development Services.** For assistance completing this application, please call customer service at (954) 921-3225, email us at [businesstax@hollywoodfl.org](mailto:businesstax@hollywoodfl.org), or visit our office at City Hall, 2600 Hollywood Blvd, Room 103. The annual business tax rate is as follows:

Per Building	Annual Tax	Application Fee	Total
_____ 1 to 5 residential living rental units	\$ 61.00	plus \$25.00	\$ 86.00
_____ 6 to 25 residential living rental units	\$126.00	plus \$25.00	\$151.00
_____ 26 to 50 residential living rental units	\$254.00	plus \$25.00	\$279.00
_____ Over 50 residential living rental units	\$510.00	plus \$25.00	\$535.00

**PART A: OWNER INFORMATION**

- 1) OWNER'S LEGAL NAME: \_\_\_\_\_
- 2) Mailing Address: \_\_\_\_\_
- 3) Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email Address: \_\_\_\_\_
- 4) **Required by State Law:** EIN/TIN or Social Security Number: \_\_\_\_\_  
As required per Florida Statute Chapter 205.0535 (6) and per Chapter 110.12 (E) of the City Code of Ordinances.

**PART B: LOCAL EMERGENCY CONTACT INFORMATION:** Required per Chapter 110.16 of the City Code of Ordinances.

- 1) Name: \_\_\_\_\_ Relationship to Owner: \_\_\_\_\_
- 2) Address: \_\_\_\_\_ Hollywood, FL Zip Code: \_\_\_\_\_
- 3) Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email Address: \_\_\_\_\_

**PART C: PROPERTY INFORMATION**

Property Address: \_\_\_\_\_ Hollywood, FL Zip Code: \_\_\_\_\_

Number of Buildings/Units: \_\_\_\_\_

**PART D: OWNER ATTESTATION AND SIGNATURE**

I affirm that the information provided above is true and correct to the best of my knowledge. I understand that the City will issue a local business tax receipt after proper review of my application, verification of the information provided, and receipt of payment for the appropriate business tax classification. I understand that issuance of a local business tax receipt does not release me from responsibility for compliance with any related City, County, State or Federal laws applicable to my business or premises. I also understand the \$25 application fee is non-refundable.

I understand that, pursuant to State law, the local business tax is levied for the privilege of doing business within a City's limits, and is non-regulatory in nature. I understand that issuance of a local business tax receipt does not legalize or condone the nature of the business being conducted if contrary to any local, state or federal laws or regulations.

Authorized Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_