

CITY OF PANAMA CITY BEACH

REGISTRATION FORM FOR MERCHANT GROSS SALES

(1) Type of Business:	Owner's Name:
Owner's Mailing Address:	Owner's Telephone Number:
City/State/Zip:	Owner's Email Address:
FEIN/Last Four Digits of SS Number:	(2) State Sales Tax Certificate Number:
(3) Business Name or Corporate Name:	Business Location Address:
Business Telephone Number:	Contact Name:
Email Address:	(4) Business to Begin On:

1% Monthly Gross Sales

Declaration: It shall be unlawful for any person to exercise any of the privileges or to carry on or engage in or conduct any of the businesses, occupations, or professions herein specifically enumerated without paying a business tax at the time and in the amount herein provided, or fail to make reports to the city clerk as provided herein, or to violate any other provisions of this chapter. (PCB Code of Ord. Sec. 14-2) By providing an e-mail address above, you consent to electronic communication, reporting and filing. Under penalty of perjury, I declare that I have read the foregoing document and the facts stated are true.

OFFICE USE ONLY

Business Account Number: _____ **Issued:** _____

Approved: _____

PLEASE EMAIL FORM TO: BUSINESSTAX@PCBFL.GOV

CITY OF PANAMA CITY BEACH

REGISTRATION FORM FOR MERCHANT GROSS SALES

INSTRUCTIONS

1. Please indicate the type of business you are operating. Provide the owner contact information; name, mailing address, telephone number and email address. The owner's Federal ID or the last four digits of social security number is required.
2. Each business must be registered with the Florida Department of Revenue for state sales tax purposes. If you have not yet received your certificate number please indicate "applied for". For further information contact the Florida Department of Revenue at _____ or www.myflorida.com/dor.
3. If a business is operating as a Corporation or LLC it must be registered with the State of Florida at www.sunbiz.org per (FS) 205.023.
4. This is the date you officially open your business to the public and start the collection of gross sales.

For Questions: 850-233-5100
ext. 2252 Joan Dennis, ext. 2305 Lauryn Pumphrey
or ext. 2318 Terri Jordan

Return To:
City of Panama City Beach
Business Tax Registration
116 S. Arnold Road
Panama City Beach, FL 32413
Email: businesstax@pcbfl.gov