



# Home Based Business

A home based business tax receipt is required for every person(s) or business that is conducting business within their dwelling unit. This packet will provide an outline of the steps taken and documentation required in order to obtain a Certificate of Use/Business Tax Receipt. For more information, please visit our website at [www.rivierabch.com](http://www.rivierabch.com) or call (561) 845-4019.

## Home Based Business Instructions

Step 1. A preliminary approval must be obtained from the Planning and Zoning department located on the 2<sup>nd</sup> floor room C214.

Step 2. Please complete the Certificate of Use and/or Business Tax Receipt application and include the following:

- Proof of ownership or copy of lease & notarized letter from property owner granting permission for a home office
- Copy of fictitious name or articles of incorporation
- For addition information about certain licensing, please see special requirements attached.

The completed application package should be submitted with a \$70.00 (nonrefundable) application fee. Please note that upon approval, there will be an additional fee due for the Certificate of Use and/ or Business Tax Receipt.

The completed application along with the necessary documentation and fees may be submitted in person at:

**600 W. Blue Heron Blvd. Riviera  
Beach, FL 33404**

Or by email:

**[businessreceipt@rivierabeach.org](mailto:businessreceipt@rivierabeach.org)**

Or by mail:

**City of Riviera Beach P.O. Box 9757  
Riviera Beach, FL 33419**

## Special Requirements for Certain Businesses



- 1) If your profession or business is certified by the Department of Business and Professional Regulation please contact (850-487-1395) or Department of Health at (850-488-0595). You must attach a copy of your certification, registration, or license to the application.
- 2) Banks, mortgage brokers, finance companies, and stockbrokers, money transmitters, and pay day lenders must be registered with the Office of Financial Regulation (850-410-9805). Please include a copy of the license with the application. License must have same address as the business.
- 3) Restauranters and mobile food unit operators must contact the DBPR Division of Hotel & Restaurants (850-487-1395).
- 4) Child care must have the approval of the Palm Beach County Health Department or you may contact them at (561-355-3018). Please include a copy of the license with the application.
- 5) Food outlets, motor vehicle repair shops, sellers of travel, charitable organizations, telemarketers, and health studios must submit a copy of their registration or exemption from the State of Florida Department of Agriculture & Consumer Services (800-435-7352).
- 6) Certified contractors must attach a copy of the State of Florida and/or Palm Beach County certification. Please contact 561-233-5525 for certification information. Also include a copy of license from the Department of Business and Professional Regulation.
- 7) Alcoholic beverages & tobacco, auctioneers, barbers, cosmetology, martial arts, CPA, condominiums, cooperatives, timeshares, home owners associations must submit a copy of their license from the Department of Business and Professional Regulations (850-487-1395)

<https://www.myfloridalicense.com/wl11.asp?mode=1&SID=&brd=&typ=>

<http://www.freshfromflorida.com/Forms-Publications/Forms>

<http://www.flofr.com/StaticPages/ApplyForALicense.htm>



# CITY OF RIVIERA BEACH PRELIMINARY ZONING VERIFICATION SHEET

Please clearly and accurately complete the following information and submit it to the Planning and Zoning Division. This Zoning Verification is required prior to applying for a City Certificate of Use and Business Tax Receipt.

Phone (561)841-0203

Email: POC@RivieraBeach.org

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Address for Verification: \_\_\_\_\_

Requested Use (Including the Name and Type of Business / Rental if Applicable):

\_\_\_\_\_  
\_\_\_\_\_

**\*\*\*\*\* AREA BELOW FOR CITY STAFF USE ONLY \*\*\*\*\***

PCN: \_\_\_\_\_

Zoning Designation: \_\_\_\_\_ Future Land Use Designation: \_\_\_\_\_

Preliminary Zoning Verification is: [ Approved:(  ) ] or [ Denied:(  ) ]

**\*A Complete City Staff Review is Needed for Final Approval of COU and BTR**

Planning and Zoning Staff Name, Initials, and Date:

\_\_\_\_\_

Please submit this sheet along with your completed Certificate of Use / Business Tax Receipt Application to the Business Tax Receipt Office (561)845-4019. If applicable, also complete and submit the Home Business Certificate of Use Agreement or the Rental Unit Owner Affidavit.

**THIS PROPERTY MUST PASS ALL REQUIRED INSPECTIONS PRIOR TO THE ISSUANCE OF A COU/BTR.**



The City of Riviera Beach

600 W. Blue Heron Blvd.
Riviera Beach, FL 33404
Telephone: (561)845-4060

Certificate of Use [ ]
Business Tax Receipt [ ]

Certificate of Use/Business Tax Receipt Application

Warning: this application is not a Certificate of Use or Business Tax Receipt

PCN# (REQUIRED) \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ SUITE # \_\_\_\_\_ CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ SUITE # \_\_\_\_\_ CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

DESCRIBE NATURE OF BUSINESS IN DETAIL: \_\_\_\_\_

MANAGER/APPLICANT'S NAME \_\_\_\_\_ (If a corporation attach a list of all officers)

OWNER \_\_\_\_\_ TITLE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ DRIVER'S LICENSE# \_\_\_\_\_ ST: \_\_\_\_\_

PLEASE INCLUDE ANY APPLICABLE INFORMATION BELOW

STATE LICENSE OR FLORIDA BAR CARD # \_\_\_\_\_

SQ. FT. \_\_\_\_\_ INVENTORY AMOUNT \$ \_\_\_\_\_ # OF EMPLOYEES \_\_\_\_\_ # OF SEATS \_\_\_\_\_

# OF MACHINES \_\_\_\_\_ # OF VEHICLES \_\_\_\_\_ # OF AMUSEMENT DEVICES/POOL TABLES \_\_\_\_\_

ARE YOU APPLYING FOR A MOBILE VENDOR LICENSE? YES OR NO (PLEASE CIRCLE ONE)

HAVE YOU BEEN ISSUED A NOTICE OF VIOLATIONS? YES OR NO (PLEASE CIRCLE ONE)

IS THIS A RENTAL PROPERTY? YES OR NO (PLEASE CIRCLE ONE) IF YES, PLEASE COMPLETE AFFIDAVIT FOR RENTAL UNIT

HAS THIS BUSINESS BEEN TAXED WITHIN THE CITY BEFORE? YES OR NO (PLEASE CIRCLE ONE)

WHERE? \_\_\_\_\_ WHEN? \_\_\_\_\_

IS THE PROPOSED BUSINESS LOCATION VACANT? YES OR NO (PLEASE CIRCLE ONE) IF YES, HOW LONG HAS THE LOCATION

BEEN VACANT \_\_\_\_\_ IF NO, WHAT IS THE CURRENT USE? \_\_\_\_\_

IS BUSINESS A HOME OCCUPATION? YES OR NO (PLEASE CIRCLE ONE) IF YES, PLEASE COMPLETE HOME OCCUPATION AFFIDAVIT

- 1. THE PLACE OF BUSINESS MUST BE OPEN TO ALL INSPECTORS.
2. IT IS THE APPLICANT'S RESPONSIBILITY TO FOLLOW UP ON THIS PROCESS.
3. DO NOT OPERATE A BUSINESS WITHOUT A CERTIFICATE OF USE AND BUSINESS TAX RECEIPT.

\*\*IMPORTANT INFORMATION\*\*

YOUR FIRST STEP IN OBTAINING A CERTIFICATE OF USE IS TO RECEIVE ZONING VERIFICATION TO DETERMINE THAT THE LOCATION IS PROPERLY ZONED FOR THE PROPOSED BUSINESS ACTIVITY. AFTER RECEIVING ZONING VERIFICATION YOU MUST OBTAIN CODE ENFORCEMENT AND FIRE INSPECTIONS AND APPROVAL FROM THE POLICE DEPARTMENT.

I certify that all the above information is true and correct, and I understand that any false statements constitute a violation of Florida State Statutes § 831.01 and will result in the revocation or denial of Certificate of Use and prosecution in accordance with the law. I hereby agree to operate the above-described business in accordance with all the laws of the State of Florida and the laws and ordinances of the City of Riviera Beach. Furthermore, I understand that the issuance of this Certificate of Use is conditioned upon the compliance with all ordinances and the results of any investigations of the above described business.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

- SIGNATURES MUST BE ORIGINAL
• APPLICATION MAY NOT BE FAXED

## City of Riviera Beach Home Business - Certificate of Use Agreement

### **Home Business**

A business, profession, occupation, trade, artisan, or handcraft conducted in a dwelling unit for commercial gain by a resident of the unit. A home business shall not include those businesses, which are required by State of Florida agencies to be open to the public, such as gun dealers.

#### **a. Incidental Nature**

Shall be clearly incidental and subordinate to the residential use of the dwelling property and shall be confined to no more than ten percent of the total floor area of the dwelling.

#### **b. Location**

With the exception of outdoor instructional services, a home business shall be conducted within the principal dwelling or off-site, and shall not be conducted within any accessory building or structure or within any open porch or carport that is attached to and part of the principal structure. Instructional services, which by their nature must be conducted outside of the principal structure, such as swimming lessons, shall be located in a rear or side yard.

#### **c. No Change to Character of Dwelling**

The residential character of the dwelling in terms of exterior appearance and interior space shall not be altered or changed to accommodate a home business.

#### **d. Employees**

Shall be conducted by members of the immediate family residing in the dwelling unit only. A maximum of one person who is not a member of the immediate family may assist in the operation of the home business at the residence.

#### **e. Home Business**

Shall be operated pursuant to a valid Certificate of Use for the use conducted by the resident of the dwelling. No more than one home business may be permitted on a residential lot.

#### **f. Advertising**

No external evidence or sign shall advertise, display, or otherwise indicate the presence of the home business, nor shall the street address of the home business be advertised through signs, billboards, television, radio, or newspapers. Advertising on vehicles shall be limited to the minimum necessary to meet requirements mandated by F.S. Chapter 489 or Chapter 67-1876 of the PBC Contractor's Certification Division Manual.

#### **g. On-Premise Sales**

A home business shall not involve the sale of any stock, trade, supplies, products, or services on the premises, except for instructional services.

#### **h. Instructional Services**

Instructional services shall meet the following additional regulations:

##### **1) Home Instruction, Inside**

- Teaching which takes place inside the dwelling unit of the instructor. Typical instruction includes music lessons and academic tutoring.

##### **2) Home Instruction, Outside**

- Teaching which takes place outside the dwelling unit, on the property of the instructor. This type of instruction is limited to subject matter which necessitates outside instruction. Typical instruction includes tennis, swimming lessons, dog training and equestrian lessons.

- 3) **Hours of Operation**
  - Instruction shall occur only between the hours of 9:00 a.m. and 8:00 p.m. daily.
- 4) **Insurance**
  - Proof of liability insurance in the amount of at least \$300,000 covering the instructional service shall be submitted prior to the issuance of a Special Permit.
- 5) **Number of Students**
  - A maximum of three students at a time shall be permitted to receive instruction during a lesson.
- 6) **Parking**
  - No more than two vehicles associated with the lessons shall be permitted to be parked at the instructor's home at any time.
- 7) **Resident**
  - The instruction must be conducted by a resident of the dwelling where the lessons are provided. Only one instructor shall be permitted to provide instruction. The Certificate of Use shall be issued to the instructor.

**i. Outside Storage**

No equipment or materials used in the home business shall be stored or displayed outside of the dwelling, including driveways.

**j. Nuisances**

No home business shall involve the use of any mechanical, electrical or other equipment, materials or items which produce noise, electrical or magnetic interference, vibration, heat, glare, smoke, dust, odor or other nuisance outside the residential building. There shall be no storage of hazardous or noxious materials on the site of the home business. There shall be no noise of an objectionable nature from the home business audible at adjoining property lines.

**k. Violations or Hazard**

If any of the above requirements are violated, or if the use, or any part thereof, is determined by the Zoning Director to create a health or safety hazard, then the Certificate of Use may be revoked.

**l. Vehicles**

One business related vehicle per dwelling unit not over one ton rated capacity may be parked at the home, provided the vehicle is registered to a resident of the dwelling & meets the resident parking code, commercial vehicles are prohibited.

**STATEMENT OF COMPLIANCE**

**I have read the above regulations for home Business Certificate of Use. I am aware of my responsibilities and liabilities for the use and business on the property. I do hereby agree to abide by each of the aforesaid stipulations. I further understand that any violation of the stipulations may result in possible code enforcement action and/or revocation of the Certificate of Use.**

**Name of Owner:** \_\_\_\_\_

**Business Name:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

**Type of Business:** \_\_\_\_\_

**Signature of Owner:** \_\_\_\_\_ **Date** \_\_\_\_\_