



**CITY OF FORT MYERS
PLANNING DIVISION/BUSINESS TAX
1825 HENDRY STREET, SUITE 101
FORT MYERS, FL 33901
PHONE: 239-321-7990**

TEMPORARY VENDOR TAX RECEIPT APPLICATION
MUST BE SUBMITTED TO THE EVENT COORDINATOR WITH PAYMENT

Business Name: _____

Business Owner: _____

Event Address _____

_____ Zip Code: _____

Mailing Address: _____

_____ Zip Code: _____

Business Telephone: _____ Alternate: _____

Federal Employer ID#: _____ SS#: _____

Florida State Sales Tax#: _____

Please give a detailed description of the business activity: _____

Name/Date(s) OF EVENT: _____

I HEREBY DECLARE THE PRECEDING STATEMENTS TO BE TRUE TO THE BEST OF MY KNOWLEDGE

Signature: _____ Title: _____ Date: _____

***IT IS THE FOOD VENDOR'S RESPONSIBILITY TO HAVE ALL NECESSARY APPROVALS FROM THE STATE OF FLORIDA HOTELS & RESTAURANT DIVISION : CONCERNING BUSINESS TAX RECEIPTS AND CERTIFICATES.

***ALL VENDOR'S WHO HAVE A CURRENT BUSINESS TAX RECEIPT **FROM THE CITY OF FORT MYERS OR LEE COUNTY** DO NOT NEED A TEMPORARY BTR. IF YOU DO **NOT** HAVE A CURRENT BTR YOU MUST APPLY FOR A TEMPORARY BTR WITH THE EVENT COORDINATOR.

***PLEASE PROVIDE A COPY OF YOUR BUSINESS TAX APPLICATION TO THE EVENT COORDINATOR. THE EVENT COORDINATOR WILL SUBMIT A COPY, ALONG WITH THE VENDOR LIST TO THE CITY OF FORT MYERS. YOUR PAYMENT WILL BE TO THE EVENT COORDINATOR.

Receipt # _____ Amount due : _____\$10.00_____