

**COMMUNITY DEVELOPMENT
USE PERMIT APPLICATION**

Case # USE20__ - _____
Date _____
Rep. _____

If you are an existing business owner changing only the name of your business, not the location or type of business OR if you have purchased a business and are not making any changes (i.e. name, location, or type) you do not need to apply for a USE permit, please proceed to the Lee County Tax collectors office to apply for your business tax receipt.

Business Name: _____
Business Location Address: _____ Unit # _____
Contact Person: _____ Daytime Phone #: _____
Email Address or Fax #: _____
Contact Person's mailing address: _____
Directions to property: _____

UPON RECEIPT OF YOUR CERTIFICATE OF USE AND PRIOR TO OPERATING YOUR BUSINESS, APPLY FOR A LEE COUNTY BUSINESS TAX RECEIPT AT YOUR NEAREST LEE COUNTY TAX COLLECTOR OFFICE.

Please indicate which of the following you are applying for, please select only one.

- | | | |
|--|--|--|
| <input type="checkbox"/> Shared Space – Office* \$35
Name of current business:
_____ | <input type="checkbox"/> Executive Suite \$35
Name of the Executive Suite:
_____ | <input type="checkbox"/> New Occupancy**** \$100
Provide 1 copy each of the existing and proposed floor plan, [†]
Provide 1 copy of a site plan [†] . |
| <input type="checkbox"/> Shared Space – Other** \$100
Provide 1 copy each of the existing and proposed floor plan [†] ,
Provide 1 copy of the site plan [†] .
Name of current business:
_____ | <input type="checkbox"/> Tenant Change*** \$35 / \$100
Provide 1 copy each of the existing and proposed floor plans [†] ,
Provide 1 copy of the site plan [†] .
Name of Prior Tenant:
_____ | <input type="checkbox"/> Charter Boat \$35
Provide Permission letter from marina
Number of Passengers: _____
Name of Marina:
_____ |
| <input type="checkbox"/> Horse Boarding non-com \$35
Provide 1 copy of the site plan [†] ,
Provide proof of sanitary facilities ^{††} | <input type="checkbox"/> Plant Nursery \$35
Provide 1 copy of the site plan [†] ,
Provide proof of sanitary facilities ^{††} | <input type="checkbox"/> Hot Dog Stand \$35

<input type="checkbox"/> Lunch Wagon \$0

<input type="checkbox"/> Ice Cream Truck \$0 |

If this Unit has been vacant for more than one year it will require additional Reviews.

- Please provide a brief description and an explanation of the intent of your business. Include the hours of operation. _____
- Are you a first time tenant? (You will be the first business occupying a recently built, free standing, single unit building) YES NO
- Will the landlord be providing a 'Shared Container' for garbage collection? YES NO
If yes, landlords name and phone#: _____
- Will the electricity need to be connected? YES NO
- Is the water supplied to the business location by a well? YES NO
- Does the business location have a septic tank? YES NO

†Site Plans and Floor Plans:

Floor plans must show total square footage, electrical outlets, bathrooms and doors. Floor plans may be hand drawn.

Site plans must show parking spaces, unless your business is located in a shopping center with five or more individual units. Site plans may be hand drawn.

††Proof of Sanitary Facilities:

Can be in the form of a port-o-let contract, or a letter from the property owner giving permission to use the home for sanitary purposes.

*Sharing an *office* space with another business which is the same or similar to yours. (i.e. – Mortgage Company w/ Title Company)

Sharing a space with another business different from yours (i.e. - Accountant w/ Florist) **OR sharing a space with another business the same as yours that is not an office, (i.e. Shoe Store w/ Clothing Store.)

***Applying for a use permit in a unit / building that was previously used for the same type of business.

****Applying for a use permit in a unit / building that was not previously used for the same type of business.

Signature: _____ Date: _____