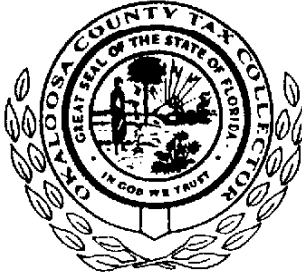


151-C Eglin Parkway N.E.
Ft. Walton Beach, FL 32548
(850) 651-7300

827 Highway 98 East
Destin, FL 32541
(850) 651-7314



101 James Lee Boulevard
Crestview, FL 32536
(850) 689-5700

203 John Sims Parkway, Suite 1
Niceville, FL 32578
(850) 651-7312

CHRIS HUGHES
OKALOOSA COUNTY TAX COLLECTOR

COUNTY OCCUPATIONAL LICENSE APPLICATION NICEVILLE

IMPORTANT: ALL LICENSE SHALL EXPIRE ON SEPTEMBER 30th OF EACH YEAR AND SHALL BE SUBJECT TO A 10% PENALTY BEGINNING OCTOBER 1, PLUS 5% PER MONTH UNTIL 25% IS REACHED.

NOTE: THIS LICENSE VALID ONLY IF REGULATIONS OF THE COUNTY ZONING AND INSPECTION OR THE CITY ZONING AND INSPECTION IN WHICH YOU ENGAGE IN YOUR OCCUPATION HAVE BEEN MET.

OWNER'S NAME _____

OWNERS MAILING ADDRESS _____
STREET OR P.O. BOX CITY STATE ZIP

NATURE OF BUSINESS _____

BUSINESS NAME _____

BUSINESS LOCATION _____
STREET NO CITY STATE ZIP

BUSINESS PHONE _____ OWNER PHONE _____

SOCIAL SECURITY OR FEDERAL ID NUMBER _____

HAVE YOU EVER APPLIED FOR AN OKALOOSA COUNTY OCCUPATIONAL LICENSE BEFORE _____

IF SO UNDER WHAT NAME _____

TOTAL NUMBER OF EMPLOYEES _____

TOTAL NUMBER OF SEATS (IF RESTAURANT OR LOUNGE) _____

TOTAL NUMBER OF VENDING MACHINES _____

TOTAL NUMBER OF AMUSEMENT MACHINES (ARCADE) _____

TOTAL NUMBER OF WASHERS AND DRYERS (COIN OPERATED) _____

TOTAL NUMBER OF ROOMS (IF HOTEL OR MOTEL) _____

TOTAL NUMBER OF APARTMENTS OR CONDOMINIUMS FOR RENT _____

TOTAL NUMBER OF SPACES FOR RENT (TRAILER PARKS OR CAMPGROUNDS) _____

I HAVE APPLIED FOR A FICTITIOUS NAME AS REQUIRED BY FLORIDA STATUTE 205.023 OR I DO NOT HAVE TO COMPLY WITH THE FICTITIOUS NAMES ACT FOR THIS REASON _____

APPLICANTS SIGNATURE _____ DATE _____

DO NOT WRITE BELOW THIS LINE

DATE ISSUED _____ LICENSE # _____ AMOUNT _____ CATEGORY _____

CLERKS INITIALS **DLS** (Send to the Niceville Office)