



Village of Palm Springs  
Planning, Zoning & Building Department  
226 Cypress Lane  
Palm Springs, FL 33461  
Phone (561) 584-8200 Ext. 3  
[www.vpsfl.org](http://www.vpsfl.org)

**APPLICATION FOR BUSINESS REGISTRATION-BUSINESS LICENSE  
& HOME OCCUPATIONAL BUSINESS**

**CHOOSE YOUR TYPE OF REQUEST:**

**New Business:**

- \_\_\_\_\_ Commercial Business
- \_\_\_\_\_ Residential Home Occupational Business

**Changes to Current Business License:**

- \_\_\_\_\_ Transfer of Name
- \_\_\_\_\_ Transfer of Address
- \_\_\_\_\_ Transfer of Owner
- \_\_\_\_\_ Address Changes
- \_\_\_\_\_ Name Change
- \_\_\_\_\_ Change of Use (e.g. retail to office)
- \_\_\_\_\_ Change of Occupancy (excluding change of proprietor of a continuing business enterprise) (retail to retail, excluding chain stores)



**Village of Palm Springs**  
**Planning, Zoning & Building Department**  
 226 Cypress Lane  
 Palm Springs, FL 33461  
 Phone (561) 584-8200 Ext. 3  
[www.vpsfl.org](http://www.vpsfl.org)

**VILLAGE ACCOUNT ID NO** \_\_\_\_\_ **FEE** \_\_\_\_\_ **DATE** \_\_\_\_\_

<b>BUSINESS</b>	<b>PCN #</b> _____
Business Name _____	
Applicant Name _____	
Business Address _____	
(Street)	(City)
(State)	(Zip)
Mailing Address _____	
(Street)	(City)
(State)	(Zip)
Name of Shopping Center _____	
Business Phone # _____ Alternate Phone # _____	
Business Fax # _____ E-Mail Address _____	

<b>OWNER OF PROPERTY</b>	
Owner Name _____	Phone # _____
Corporation _____	Phone # _____
Address _____	
(Street)	(City)
(State)	(Zip)
Alternate Phone # _____	Fax # _____
E-Mail Address _____	FEIN _____

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Printed Name

STATE OF FLORIDA  
 COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_ who is personally known to be, or who has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
 Notary Public

\_\_\_\_\_  
 My Commission Expires

**DESCRIBE NATURE OF BUSINESS** (Proposed use list name/type of

sales)\_\_\_\_\_

Has the business ever had a previous license suspended or revoked?  Yes  No (If yes, please provide the date of the suspension/revocation; the location and the date) \_\_\_\_\_

Proposed Hours of Operation/Days Open\_\_\_\_\_

\*Allowed Hours 7am-11pm; for other hours of operation file for a Variance (Hours of Operation) with the PZB Department

Business Start Date\_\_\_\_\_ Is this a Charitable Organization?  Yes  No

Will you be storing/handling Hazardous Materials?  Yes  No Will business sell alcoholic beverages?  Yes  No  
ABT License # \_\_\_\_\_

Does your business have shopping carts on premises?  Yes  No (If yes, please provide us a Loss Prevention and Retrieval Plan)

Will used merchandise be sold on the property?  Yes  No

Does the proposed business constitute a Change of Use or Occupancy Classification?  Yes  No

Is there an existing automatic fire sprinkler or fire alarm system?  Yes  No

Will your business require remodeling/renovation of location?  Yes  No (If yes, see permit application attached)

Permit Number (if there was renovation, expansion, establishment of use or new construction)\_\_\_\_\_

Has a code compliance Notice of Violation been issued?  Yes  No

**To support the Use & Occupancy Certificate for your business, please fill in the appropriate quantity as follows:**

Building Square Footage\_\_\_\_\_ Multi-Tenant Building: Yes  No

Are you sharing spaces with another business? Yes  No

Outdoor Sales/Storage Area\_\_\_\_\_

Number of Dwelling Units\_\_\_\_\_ Number of Employees & Total (Peak Shift) \_\_\_\_\_

Seating Capacity\_\_\_\_\_ Number of Restaurant/Bar Seats Provided\_\_\_\_\_

Number of Business & Accommodation Rooms\_\_\_\_\_

Units Served (for private utilities only)\_\_\_\_\_ Number of coin operated machines\_\_\_\_\_

Number of off-street parking spaces assigned to this business\_\_\_\_\_

Number of business vehicles (to be parked at the location) and Type of vehicles:

\*Vehicles must be parked in rear or side of the building and screened from view

**To obtain a License you will need to provide a copy of all of the following documents (applicable to the business)**

**CHECK MARK ALL ITEMS SUBMITTED OR N/A:**

1. \_\_\_\_ Palm Beach County Business Tax Receipt Application
2. \_\_\_\_ State Certification or Registration or Licenses
3. \_\_\_\_ Certificate of Liability & Workman's Comp Insurance (contractor only)
4. \_\_\_\_ Copy of Driver's License
5. \_\_\_\_ Printout of Sunbiz on-line records or copies of business entity's filing documents
6. \_\_\_\_ Printout of Sunbiz on-line records or copy of fictitious name registration (if using a fictitious name, sole proprietorship, DBA etc.)
7. \_\_\_\_ Materials Safety Data Sheets (MSDS) for all hazardous materials to be used (if they will be stored at the business location)
8. \_\_\_\_ Evidence of ownership or interest in property (deed, bill of sale, current lease, letter of sharing etc.)
9. \_\_\_\_ Proof of Residence (utility bill, electrical bill, car registration etc.) (Home Occupation Only)
10. \_\_\_\_ Florida alcoholic beverage license (if selling alcohol)
11. \_\_\_\_ Survey or site plan depicting outside sales/storage area, parking for business vehicles or assigned parking spaces
12. \_\_\_\_ Evidence for exemption (religious/fraternal/civic organization as entitled by law or less than \$1000 of capital in business; ex. business valued less than \$1000, rent less than \$1000; inventory/equipment valued less than \$1000 etc. all upon approval by Planner)
13. \_\_\_\_ Life safety plan (architectural drawings shall include all relevant and required details, but not limited to, occupancy type, occupant load, fire rated walls, exit signs, emergency lighting, travel distances, common path of travel, etc.)
14. \_\_\_\_ Palm Beach County Fire Rescue inspection (shall be done after VPS License approval)

## HOME OCCUPATION AFFIDAVIT FOR BUSINESS TAX RECEIPT

When applying for a home occupation business tax receipt please follow the rules pertaining to the Village of Palm Springs ordinances:

1. A home business tax receipt is for an OFFICE USE ONLY
2. NO commercial vehicles to be stored on the property at any time
3. NO manufacturing of goods at the location at any time
4. NO employees or customers at the location at any time
5. NO signs advertising the business shall be posted on the property
6. NO storage of inventory at the location at any time

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

---

**TO BE COMPLETED BY ZONING REVIEWER ONLY**

Existing Zoning \_\_\_\_\_ Required Zoning \_\_\_\_\_

Prior use of bldg./bay/tenant space \_\_\_\_\_

Proposed use of bldg./bay/tenant space \_\_\_\_\_

Permitted use or Council special exception approval \_\_\_\_\_

Supplemental regulations or Conditions of approval \_\_\_\_\_

Adequate Parking? \_\_\_\_\_

Number of Parking Spaces required \_\_\_\_\_

Number of Parking Spaces provided \_\_\_\_\_

Complies with Concurrency:  Yes  No

Property to Code? \_\_\_\_\_

Approved for Certificate  Denied/Rejected for Certificate

Signature of approval \_\_\_\_\_

Printed name \_\_\_\_\_

Date of approval \_\_\_\_\_

## **OBTAINING A USE & OCCUPANCY CERTIFICATE AND INSPECTION PROCESS**

**All Businesses must obtain a Certificate of Use prior to occupying or doing business within the space. Home Businesses do not require a Certificate of Use.**

**Contact the Planning, Zoning & Building Department at 561-584-8200 Ext. 8462 to determine if the proposed use is permitted in the proposed location prior to filling out an application.**

A Certificate of Use is required if you meet ANY of the following criteria:

- a. You are a new business
- b. You are making an application for an existing business at a new location
- c. You are adding and/or changing the type of use of a legally established business
- d. The use has an active Certificate of Use and the application is a new owner of the use, i.e. Change of Owner
- e. The use has an active Certificate of Use and the applicant wishes to change the name of the business, i.e. Change of Business Name
- f. Before occupancy of any new building or commencement of any activity when Architecture, Site Plan or a Special Exception approval is required for either.
- g. Before any changes of occupancy of land or buildings other than a change in residents of a dwelling or proprietors of a continuing business enterprise.
- h. To signify compliance with the terms of a secondary dwelling unit.

### **Section 70-124 – Use and occupancy certificates and inspection required**

- (a) It shall be unlawful for any person either directly or indirectly to engage in or to conduct any business, profession, or occupation in the village at a given location or premises without a use and occupancy inspection as required herein.
- (b) A use and occupancy inspection shall be required of persons or businesses:
  - (1) Upon the application for a new use and occupancy certificate; or
  - (2) Upon request of law enforcement, fire prevention, code enforcement or building official as necessary to maintain the public health, safety and welfare at a given location or premises; or
  - (3) Upon a new owner obtaining title to a property on which a business, profession or occupation is conducted;
  - (4) Every third year for all existing commercial and industrial properties;
  - (5) Every third year for single-family, multiple family, townhome or condominium unit(s) or other dwelling unit(s) being rented as residential dwelling units;
  - (6) Upon re-location of a business or transfer of a local business tax receipt to a new location; or
  - (7) As otherwise required by this Code

If the village is denied access to the premises to conduct the use and occupancy inspection then a use and occupancy certificate shall not be issued, shall not be renewed, and/or shall be revoked and the person/business shall be subject to the penalties set forth in this article, including, but not limited to the revocation of the Palm Springs business license.

### **Inspection Information:**

All applications for a new business, change of location or use require inspections by the Zoning Division, Building Division, and the Fire Marshall prior to approval. These inspections will be coordinated by the Zoning Technician.

Inspections to determine if your space meets Florida Building Code, Life Safety Codes and Village zoning requirements for the use intended before the certificate of use is issued.

Inspections by all disciplines will be scheduled within 72 hours of application submittal. All inspections **are performed between 8:00 am and 4:30 pm on Wednesdays. There are no specific or assigned times for inspections.** However, a Village staff member will contact you to set up a time to meet at the location for the inspection on that specific day.

**THIS APPLICATION MUST BE COMPLETED IN FULL AND RETURNED TO:**

The Village of Palm Springs  
Planning, Zoning & Building Department  
226 Cypress Lane  
Palm Springs, Florida 33461  
Ph. 561-584-8200 Ext. 3  
[www.vpsfl.org](http://www.vpsfl.org)



**ALL LICENSES EXPIRE ANNUALLY SEPTEMBER 30<sup>TH</sup>. PENALTY FOR NON-RENEWAL IS 10% FOR OCTOBER; ADDITIONAL 5% PER MONTH – MAXIMUM 25%**

**If the license is issued between April 1<sup>st</sup> and July 1<sup>st</sup>, the fee is prorated one-half (1/2) of the full application fee for one year shall be paid, and between July 2<sup>nd</sup> and September 30<sup>th</sup>, the fee is prorated one-fourth (1/4) of the full application fee for one year shall be paid.**

**NO REFUNDS will be issued for businesses closed during the full fiscal year or for licenses paid in error.**

**NOTE TO APPLICANT**

**This application must be completed in full and submitted with the required documentation and returned to our office. If you fail to accomplish the above, your application will not be accepted.**

**Prior to issuance, all business license applications are required to be reviewed and approved by the Village for compliance with zoning regulations (561-584-8200 Ext. 8462, Planner) and to assure the business is located in an appropriate location for the type of business proposed. If the business type is not as identified on this application, or if the business is not otherwise allowed in the zoning district of the proposed location, you will be required to relocate the business to an appropriately zoned location.**

**Any structural or interior modifications may require prior approval from Planning, Zoning & Building**

**Compliance Inspection Required**

**The Palm Beach County fire Marshall will be provided a copy of your business license application. Please contact PBC Fire Rescue (561-233-0050) to determine if your business needs to provide additional safety features.**



## Life Safety Plan Requirements

- Must be an architectural drawn document
- Include all details
- Occupancy type
- Occupant load
- Fire rated walls
- Exit signs
- Emergency lighting
- Travel distances
- Common paths of travel
- MUST BE SIGNED AND SEALED
- 2 COPIES

THANK YOU

VILLAGE OF PALM SPRINGS  
PLANNING, ZONING & BUILDING DEPARTMENT  
226 CYPRESS LANE  
PALM SPRINGS, FLORIDA 33461



## Business Tax Receipt "BTR" Inspection



Prior to the issuance of an Initial Business Tax Receipt your business shall receive a Life Safety Inspection by a Palm Beach County Fire Rescue Fire Safety Specialist. The purpose of this inspection is to ensure compliance with the requirements of the Florida Fire Prevention Code. Most importantly though, the inspection helps to protect your business, employees, customers, and property. In addition, your business is subject to Periodic Life Safety Inspections by a Fire Rescue Fire Safety Specialist; which inspects for all the same items as the BTR Inspection.

The inspection consists of an evaluation of all things "Life Safety" from fire systems to evacuation routes to electrical systems and more.

While not all inclusive, the following includes areas that are most often found in violation during these inspections.

1. All of the below listed equipment or devices must be in compliance with an approved Nationally Recognized Testing Laboratory, i.e. UL, FM...
2. Fire Extinguishers are required in every business. The size and location of the extinguisher depends upon the hazard present. In most cases the minimum size is a 2A:10BC. They need to be accessible (not blocked or hidden) to all employees and customers and are required to be inspected annually by an independent extinguisher company. Personnel are also required to be trained on the proper use.
3. Exit Signs & Emergency Lighting are required to be operational 24/7. These devices provide for visible points of reference should the power be lost which is very common in south Florida due to the high occurrence of inclement weather. These devices are also required to be inspected and tested monthly. Documentation of these inspections and testing results may be requested by the Fire Marshal's office for proof of compliance. Every means of egress (exits) shall always be kept clear.
4. Storage of Hazardous Materials "HAZMAT" needs to be identified to the Fire Department ahead of time. By providing "SDS" safety data sheets (*formally known as MSDS sheets*) the location of these materials greatly aids in pre-planning incident response and increasing the safety of responding emergency personnel. This is a mandatory requirement.
5. Blocking access to fire alarm pull stations or blocking the view of fire alarm notification devices. These devices always need to be accessible and visible.
6. Fire sprinkler systems are required to protect property and available means of egress. At no time, should anything be hung from a sprinkler head or piping—this is strictly prohibited by the fire code.
7. Extension Cords per the Fire Code are only allowed for temporary use and no greater than 90 days. At no time, should appliances such as refrigerators or microwaves be plugged into an extension cord—these devices should be plugged directly into an outlet. At no time, should extension cords be run through a wall, ceiling or floor.

For more information on Fire Safety click here.

CRRD

EXCELLENCE TODAY



IMPROVING TOMORROW



## Business Tax Receipt "BTR" Inspection

8. With few exceptions, open flames are not allowed. While you may still have candles – if you are a business office, they are not allowed to be lit! Electric candles are an acceptable alternative.
9. Space heaters may be allowed depending on the type of business, but they are required to have an automatic shut off and need to shut off automatically if knocked over.
10. Surge Protectors/Outlet Multipliers—these devices are great when you do not have enough outlets in your office however there are some basic guidelines that should be followed:
  - Plug these devices directly into an outlet
  - No daisy chaining (do not plug one into another)
  - All Outlets multipliers are required to be listed for the use according to the listing laboratory

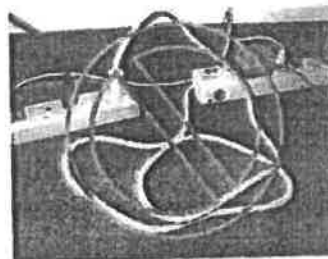
*To Schedule your BTR Inspection, please call (561) 531-3521 or send an email to [Fire-BTR@pbcgov.org](mailto:Fire-BTR@pbcgov.org)*



**Plugged Directly Into an Electrical Outlet**



**Plugged Directly into an Electrical Outlet**



**No Daisy Chaining**



**Overloaded**



**Extension cords are for Temporary Use ONLY and NOT to be used as permanent wiring**

For more information on Fire Safety click here

**CRRD**

EXCELLENCE TODAY



IMPROVING TOMORROW