

City of Hallandale Beach  
Planning and Zoning Division  
**Business Tax Receipts**



**PROPERTY OWNER/LANDLORD AUTHORIZATION TO CONDUCT BUSINESS**

I certify that I am the property owner and/or authorized agent of the premises located at:

\_\_\_\_\_, \_\_\_\_\_  
(Address) (Lessee bay/unit/suite #(s))

Folio #: \_\_\_\_\_ and have leased said premises to: \_\_\_\_\_  
(Name of lessee)

for the purpose of conducting his/her business of: \_\_\_\_\_  
(Name and type of business)

I further understand that the building will be inspected by the City of Hallandale Beach inspectors and agree that **any violations** (structural, electrical, plumbing, mechanical, and/or fire prevention) will be corrected by me or the lessee. I also understand that no alterations or additions will be made within or to the premises until the proper permits have been issued. In addition, no signs will be altered or installed upon the premises without the proper permits being issued. Lastly, any violations not corrected may be cited by the Code Compliance Division, which pursuant to Florida State Statutes, I am held ultimately responsible for regardless of any lease conditions or agreements with the lessee. This authorization shall apply to all applications submitted for new and transfer business tax receipts as well as to all renewals for the business.

\_\_\_\_\_  
Signature of owner or agent

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

\_\_\_\_\_  
Title

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Date

State of Florida:

County of Broward:

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
by \_\_\_\_\_ who is personally known to me or who has produced  
\_\_\_\_\_ as identification, and who did (or did not) take an oath.

(SEAL)

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

My commission expires: \_\_\_\_\_