

City of Winter Haven
Peddlers/Temporary/Restricted
Business Tax Receipt Application
209 Avenue F NW
Winter Haven, Florida 33881
Phone: 863-298-7656 Fax: 863-298-4495

Class ID #: _____ Class Fee Amount: _____ Account#: _____

Name of Applicant: _____

Address of Applicant: _____

(Street)

(City) (State) (Zip)

Phone Number: _____ Fax Number: _____

Description of the nature of the business & goods to be sold: _____

Name of Business Furnishing Goods to Sell: _____

Mailing Address of Business: _____

(Street)

(City) (State) (Zip)

Peddlers/Temporary/Restricted License

Temporary Dates: _____

Temporary Location: _____

Questions or Problems: 863-298-7656

Classification of License: Peddlers

Cost of License: \$60.00 per year (a maximum of three (3) months – no more than 3 times per year, 30 days maximum each occurrence)
\$20.00 per day

1. Attach a notarized letter from the property owner or event coordinator granting permission for the use and accessibility to a restroom and cleaning facilities.
2. The activity must not be set up on a vacant lot or roadside right-of-way.
3. No vending allowed at the South West Complex grounds.
4. If selling food, applicant needs to have authorization from the Division of Hotel and Restaurants (850-487-1395) and/or Dept. of Agriculture and Consumer Services (850-488-3022).

Applicant Signature: _____

Date: _____

Future Land Use: _____

Zoning: _____

Planning Approval: _____

Date: _____

Planning Denial: _____

Date: _____