CITY OF ST. PETERSBURG, FLORIDA
LOCAL BUSINESS TAX RECEIPT

Oper: AJJORDAN Type: CC Drawer: 1
Date: 10/05/16 01 Receipt no: 10479
2017 27263
OR 11 RENEW OCC LICENSE
1.00 $65.00
Trans number: 18648459
VI VISA $67.00
Trans date: 10/05/16 Time: 8:04:02

ACCOUNT NO. DATE

2017
EXPIRES 9/30/2017

68905 September 30, 2016

st.petersburg
www.stpete.org

BUSINESS:

ABC 1-2-TREE
.
2901 32ND AVE N
SAINT PETERSBURG FL 33713-2633

17-00027263 DESCRIPTION OF OCCUPATION, PROFESSION, OR BUSINESS
LANDSCAPER & TREE SURGEON 65.00

0.00
0.00
TOTAL 65.00

MAIL:

ABC 1-2-TREE
2901 32ND AVE N

SAINT PETERSBURG FL 33713

Changes in business name, address, mailing name or address, as well as additions to the business activity, may require additional applications. Please contact this office before making changes or if the description on this receipt does not reflect your entire business activity. Additional activities may require additional taxes.

Failure to renew before the expiration date may result in penalty fees being assessed.

Display this receipt conspicuously at all times in the place of business. If there is no place of business, this receipt must be presented to any police officer or officer of the city upon their request.

Many business taxes are transferable from one owner to another, or one location to another. To transfer this receipt, contact our office for information and price, and fill in the following.

This local business tax receipt does not allow the holder to violate any city law, ordinance or regulation. It is not an endorsement, approval or disapproval of the holder's skill or competence. This business tax receipt is not proof of the compliance or non-compliance of the holder with other laws, regulations or standards. In addition to obtaining this local buisness tax receipt, the holder shall be responsible for complying with all applicable laws, regulations and standards including but not limited to the City's Construction Services and Zoning Department requirements.

City of St. Petersburg, Florida

I, _____ hereby assign all my rights, title and interest in local business tax receipt # _____ to _____ . _____
(name of new owner) (signature of previous owner)

*** CUSTOMER RECEIPT ***

Office hours: Monday through Friday, 8 a.m. to 5 p.m. Phone: 727–893-7241