



CITY OF DANIA BEACH
COMMUNITY DEVELOPMENT DEPARTMENT
ZONING DIVISION

100 W Dania Beach Blvd. Dania Beach, FL 33004
TEL: 954-924-6805 / FAX: 954-922-2687

CERTIFICATE OF USE APPLICATION

Date of Application: _____

Folio #: _____

Name of Business: _____

Property Zoned: _____

D/B/A: _____

Business Tel: _____

Business Address: _____

Business Fax: _____

Building #: _____ Bay/Suite #: _____

Emergency Tel: _____

Email: _____

Square Ft of Bay/Space: _____

Business Owner's Name: _____

Multi-Tenant Bldg: [] Yes [] No

Business Owner's Address: _____

Home Tel: _____

Business Owner's City/State/Zip: _____

Alternate Tel: _____

CERTIFICATE OF USE APPLIED FOR (CHECK ONE):

- New Business Change of Business Name Change of Ownership
- Adding or Changing of Use Transfer Location (existing business to new location)

PROPOSED USE (DETAILED DESCRIPTION OF ACTIVITIES): _____

NOTE: Application must be signed by business owner or authorized corporate officer.

Signature

Title

Printed Name

Date

State of Florida:
County of Broward:

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

NOTARY PUBLIC (SEAL)
MY COMMISSION EXPIRES:

OFFICE USE ONLY: DO NOT COMPLETE BELOW THIS LINE

[] APPROVED: CERTIFICATE NUMBER: _____

BY (INITIALS): _____

[] DENIED: INFORMED APPLICANT VIA: _____

DATE: _____