

MARINE AND WATERFRONT PROTECTION AUTHORITY Business Approval Application

Business Name: _____ Business

Location & phone#: _____

Owner's Name & phone#: _____

Storage Location: _____

BTR#: _____

APPLICANT CHECKLIST

1. Cover Letter providing a synopsis of the application
2. Copy of the City of Miami Beach Business Tax Receipt Application
3. Verification of the company's ability to do business in the State of Florida
(i.e., Company's Corporate Papers, d/b/a Registration with Florida Secretary of State, etc.)
4. Copy of Business Proposal, to include:
 - a. Business Description, in detail
 - b. Operating location
 - c. Hours of operation (specify overnight & after-hours, if applicable)
 - d. Number of employees
 - e. Specialized staff training if any
5. Copy of Business Insurance, reviewed by CMB Risk Management
6. Copy of all instructions and training provided to your customers
7. Copy of executed Lease or Agreement with property owner
8. Copy of Site Plan
9. Copy of your route information from beginning to end (for tour guides only)
10. Copy of all Captains' Licenses
11. Copy of inspections made by the Coast Guard, if applicable.

OFFICE USE:

Received by: _____ Date: _____

Print & Sign

Marine and Waterfront Protection Authority Board Liaison:

Approved: _____ Date: _____

Denied: _____ Date: _____

We are committed to providing excellent public service and safety to all who live, work, and play in our vibrant, tropical, historic community.

BTR INSURANCE REQUIREMENTS

Effective - 01/01/2021

| | License or Permit Type | General Liability | Liquor Liability | Auto Liability | Workers Comp. | Best Rating | Additional Requirements |
|----|---|--|------------------------|-----------------------------------|---------------|-----------------|--|
| 1 | Beachfront Concessions | \$1M per occur./ \$2M aggregate | \$1,000,000 if applies | \$100,000 (delivery operations) | Yes | A:VII or higher | |
| 2 | Film | \$1M per occur./ \$2M aggregate | | | Yes | A:VII or higher | |
| 3 | Fireworks | \$1M per occur./ \$2M aggregate | | | Yes | A:VII or higher | |
| 4 | General | \$1M per occur./ \$2M aggregate | \$1,000,000 if applies | \$1,000,000 | Yes | A:VII or higher | |
| 5 | Garbage/Trash | \$1M per occur./ \$2M aggregate | | \$1,000,000 | Yes | A:VII or higher | |
| 6 | Bicycle Rentals | \$1M per occur./ \$2M aggregate | | | Yes | A:VII or higher | |
| 7 | Scooters | \$1M per occur./ \$2M aggregate | | \$1,000,000 Combined Single Limit | Yes | A:VII or higher | Certificate must indicate scooter rentals. Scooters are defined as motor vehicles and as such must comply with CMB Comm. Auto Requirements |
| 8 | Segway's | \$1M per occur./ \$2M aggregate | | | Yes | A:VII or higher | Certificate must indicate Segway rentals |
| 9 | Sidewalk | \$1M per occur./ \$2M aggregate | \$1,000,000 if applies | | Yes | A:VII or higher | |
| 10 | Special Events | \$1M per occur./ \$2M aggregate | \$1,000,000 if applies | | Yes | A:VII or higher | |
| 11 | Transportation | \$1M per occur./ \$2M aggregate | | \$1,000,000 per occurrence | Yes | A:VII or higher | U.M. Fifty Thousand, if available |
| 12 | Guided Tours | \$1M per occur./ \$2M aggregate | | | Yes | A:VII or higher | |
| 13 | Valet Parking (General) | \$1M Garage Liability / Garage Keepers Liability | | | Yes | A:VII or higher | |
| 14 | Water Craft – Yacht/Boat Charter (Capacity of 9 or less) | \$3M per occur./ \$5M aggregate | | | Yes | A:VII or higher | Coverage noted as Protection & Indemnity |
| 15 | Water Craft – Yacht/Boat Charter (Capacity of 10 or more) | \$5M per occur./ \$10M aggregate | | | Yes | A:VII or higher | Coverage noted as Protection & Indemnity |
| 16 | Water Craft – Jet ski | \$1M per occur./ \$2M aggregate | | | Yes | A:VII or higher | Coverage noted as Protection & Indemnity |

City of Miami Beach needs to be listed as an additional insured under each category of vendor for General Liability Insurance

Insurance Certificate Requirements:

1. Original certificates preferred-fax copies will be accepted at the discretion of Risk Management.
2. Certificates must be dated within 90 days of the current date.
3. With regards to new insurance, the certificate must contain a "Binder No." if the policy is not issued.
4. Certificates may be rejected if they appear altered and may be subject to confirmation with insurance agent before approval.

MARINE RELATED BUSINESS REQUIREMENT CHECKLIST

Required Documents

- ☐ Approved Certificate of Use - <http://www.mbselfservice.com>
- ☐ Executed Dockage Agreement with Marina Slip Number/Landing Agreement
- ☐ Articles of Incorporation - <https://dos.myflorida.com/sunbiz>
- ☐ Federal ID No – www.irs.gov
- ☐ Fictitious Name Registration - <https://dos.myflorida.com/sunbiz/forms/fictitious-name/>
- ☐ Valid Vessel Certificate/Registration
- ☐ Marine Authority Approval
 - ☐ Contact Code Compliance at 305.673.7555 to schedule a meeting or email TashaByars@miamibeachfl.gov
- ☐ Insurance Approval; see attached insurance requirements
 - ☐ Contact Risk Management at 305.673.7524 / submit COI to KevinIrizarry@miamibeachfl.gov for approval

Upon completion of all approvals, the applicable fees will be due: * See Fee Schedule

- ☐ Boat Slips – **Occupational Code: 95003407**
- ☐ Commercial passenger boat (per boat) - **Occupational Code: 95003402**
- ☐ Charter (per boat) - **Occupational Code: 950003403**
- ☐ Livery (renting) – **Occupational Code: 95003200**
- ☐ Sightseeing, excursion – **Occupational Code: 95003401**
- ☐ Water Taxi – **Occupational Code: 95003415**

Notes

- ☐ A new CU is required when adding vessels to the BTR.
- ☐ Marine Authority approval is required when adding vessels to the BTR
- ☐ **Fees are subject to change every fiscal year whenever there is a change in the Consumer Price Index (CPI).

MIAMI BEACH

City of Miami Beach, Finance: Business Tax Receipt Division

1755 Meridian Avenue, Suite 100, Miami Beach, FL 33139

Dear Customer,

All businesses wishing to operate in the City of Miami Beach must first obtain a **CU**. For information regarding the CU, please email CU@miamibeachfl.gov.

To apply for a **CU** please follow these instructions:

1. Go to: <http://www.mbselfservice.com> (reviews may result in a request for additional information/documentation).
2. Request a Fire Inspection via Citizen Self Service Portal (CSS) at <http://www.mbselfservice.com>.
3. Once the CU application passes the Fire Inspection, the CU will be automatically issued, and you will be able to apply for your **Business Tax Receipt (BTR)**.
4. To apply for your **BTR** please go to the Citizen Self Service Portal (CSS) at: <http://www.mbselfservice.com>
 - a) Please see the attached requirement checklist and upload document accordingly

If all requirements are met, upon verification and payment, your BTR will be issued on-the-spot.

If you have any questions, please do not hesitate to email us at btrapp@miamibeachfl.gov.

Thank you.

Business Tax Receipt Division

FINANCE DEPARTMENT

1700 Convention Center Drive, Miami Beach, FL 33139

Tel: 305-673-7420 / Fax: 786-394-5374 www.miamibeachfl.gov

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Business Tax Receipt Application

***This application is NOT your Business Tax Receipt. Do not operate your business until the CU and Business Tax Receipt are issued**

Certificate of Use #: _____

Application Date: _____

Application Check List (required documents):

- | | | |
|---|--|--|
| <input type="checkbox"/> Approved Certificate of Use | <input type="checkbox"/> DERM* | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Articled of Inc. (if applicable) | <input type="checkbox"/> Federal ID No | <input type="checkbox"/> Fictitious Name Registration |
| <input type="checkbox"/> State License (if applicable) | <input type="checkbox"/> Resort Tax Registration | <input type="checkbox"/> Executed Lease/Recorded Deed/ Signed Sharing Space Letter/Rental Slip Agreement |

| | | |
|----------------------|--|---|
| Type of Application: | <input type="checkbox"/> New Business <input type="checkbox"/> Change of Owner <input type="checkbox"/> Adding Seats | <input type="checkbox"/> Additional Service/Occupation <input type="checkbox"/> Change of Location |
| Type of Business: | | |

Business Information

| | |
|--------------------|---|
| Business Name: | <input type="checkbox"/> Lease <input type="checkbox"/> Own |
| Business Location: | Hours of Operation: |

Owner's Information

| | | |
|--------------------------|-----------------|----------------|
| Name of Owner/Principal: | Date of Birth: | SSN: |
| Federal ID No: | DL No. | State |
| Home Address: | | |
| Street | City | State Zip |
| Home Phone: | Business Phone: | Cell Phone |
| Email Address: | | |

Contact Information

| | |
|-------------------------------------|--------------------------|
| Send Business Mail to Attention of: | Business Phone: |
| Address: | |
| Street | City State Zip |
| Name of Emergency Contact: | Phone Number |

Is the Business a:

| | |
|-------------------------|--|
| Hotel or Apartment? | How many units? _____ How many washers/dryers (owned)? _____ Swimming Pool? How many? _____ |
| Restaurant? | How many seats inside? _____ How many seats outside (private property only) _____ Hours of Serving Alcohol? <input type="checkbox"/> Until Midnight <input type="checkbox"/> Until 2am <input type="checkbox"/> Until 5am <i>*If there will be seats outside on the public property (sidewalk), a Sidewalk Café Permit is required. Contact Public Works at 305-673-7180.</i> |
| Office? | Approximate sq. ft.? _____ |
| Retail Establishment? | What is the retail value of the inventory? General: \$ _____ Food: \$ _____ Liquor: \$ _____ |
| Beauty/Nail/Barbershop? | How many stations? _____ |
| Motor Scooter Rentals? | How many scooters? _____ Where are you storing the scooters? Address: _____ |

*Review and approval of a Municipal Certificate of Use from the Department of Regulatory and Economic Resources (RER) is also required. Approvals from other regulatory agencies may be required. Follow this link to apply: <https://wwwx.miamidade.gov/Apps/RER/EPSPortal/>

For a sign permit, please contact the Planning Department at 305-673-7550.

Any person who is applying for a Business Tax Receipt in the City of Miami Beach, who shall knowingly make a false statement and/or knowingly fail to disclose and/or misrepresent the information requested shall be subject to penalties authorized by State law and City Code Section 102-375.

I understand that it is my responsibility to follow-up on the approval process for this application.

I HAVE READ THIS APPLICATION AND I DO FREELY AND VOLUNTARILY CONFIRM THAT THE STATEMENTS AND INFORMATION CONTAINED THEREIN ARE TRUE AND CORRECT.

| | | |
|------------|-----------|------|
| Print Name | Signature | Date |
|------------|-----------|------|

FEES**

| | |
|--|--|
| Application Fee (Non-Refundable) | \$48 |
| BTR Fee- Based on Business type | see Schedule of taxes; City Code Section 102-379 |
| Resort Tax Registration Fee (Non-Refundable) | \$27 |

**Fees are subject to change every fiscal year whenever there is a change in the Consumer Price Index (CPI).