



# CITY OF JACKSONVILLE BEACH BUSINESS OPERATING ON BEACH PERMIT APPLICATION

City Clerk's Office  
11 North 3<sup>rd</sup> Street  
Jacksonville Beach, FL 32250  
(904) 247-6250 ext. 11

## SECTION 1: Business Information

Application Date: \_\_\_\_\_

Business Name: \_\_\_\_\_ LBTR# \_\_\_\_\_

Street Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Applicant/Contact Name & Phone No.: \_\_\_\_\_

Proposed Business Location (that abuts the beach): \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

## SECTION 2: Attachments - Submit with Application:

1. Certificate of Insurance, \$1,000,000.00 General Liability, City of Jacksonville Beach as an additional insured, copy attached:  Yes  No

2. Hold Harmless Agreement, copy attached:  Yes  No

3. Describe in detail how the equipment/materials used in operation of said business will be transported to the beach:

\_\_\_\_\_

4. Hours of Operation permitted within 8:00 a.m. to 7:00 p.m. Please list the hours, days, and months of operation for your business on the beach:

\_\_\_\_\_

5. Identify where along the beach the business will be located:

\_\_\_\_\_

6. Agreement (required) to operate from proposed business location attached:  Yes  No

7. List all the equipment/materials for rent on the beach: \_\_\_\_\_

\_\_\_\_\_

## SECTION 3: Certification:

**I certify the information contained herein is true and correct to the best of my knowledge. I understand that any false or misleading information on this application, failure to pay the required permit fee, or failure to comply with the City of Jacksonville Beach Ordinance 2008-7963, Permit to Operate Business On Beach, may be cause for the City Manager to revoke the permit. This permit is not transferrable upon the sale/transfer of ownership of the business.**

**I have received a copy of Ordinance No. 2008-7963.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

## REVIEW PROCESS

### SECTION 4: Planning & Development – Zoning Compliance

Proposed Business Location (that abuts the beach): \_\_\_\_\_

Zoning Classification: \_\_\_\_\_ Business/Occupation: \_\_\_\_\_

Permitted Use:  Yes  No

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

### SECTION 5: Review/Approval

1. City Clerk's Office reviewed, Initial: \_\_\_\_\_ Date: \_\_\_\_\_

2. Parks & Recreation Dept. reviewed, Initial: \_\_\_\_\_ Date: \_\_\_\_\_

3. Approved for permit by: \_\_\_\_\_ Date: \_\_\_\_\_

**George D. Forbes, City Manager**

**(Return to City Clerk's office for processing)**

**SECTION 6: City Clerk's Office** SIC Code: 7999 Business Control # \_\_\_\_\_ Permit # \_\_\_\_\_

Annual Permit \$ 79.20  Half Year Permit \$ 39.60  Cash  Check # \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_