## LOCAL BUSINESS TAX EXEMPTION AFFIDAVIT



(Only check applicable box below)

	I am a <b>veteran</b> of the United States Armed Forces who was honorably discharged upon separation from service, or the <b>spouse</b> or <b>unremarried surviving spouse</b> of such a veteran. I own a majority interest in a business with fewer than 100 employees. F.S 205.055
	I am the <b>spouse of an active duty military service member</b> who has relocated to Lee County pursuant to change of station orders. I own a majority interest in a business with fewer than 100 employees. F.S 205.055
	I am a person who is <b>receiving public assistance</b> as defined in s. 409.2554. I own a majority interest in a business with fewer than 100 employees. F.S 205.055
	I am a person whose <b>household income is below 130% of the <u>federal poverty level</u></b> based on the current year's federal poverty guidelines. I own a majority interest in a business with fewer than 100 employees. F.S 205.055
	<b>Motor vehicle</b> used for the sale and delivery of any tangible personal property as defined in F.S. 205.063.
	I own an <b>agricultural</b> business as defined in F.S. 205.064.
	I am a <b>disabled person physically incapable of manual labor</b> , with not more than one employee or helper, and will use my own capital not in excess of \$1,000. Attached is a certificate or statement from a county physician or other reputable physician as to the nature and extent of the disability. Certificate or statement indicates the physician's license number. I reside in Lee County. F.S 205.162
	I am <b>65 years of age or older</b> , with not more than one employee or helper, and will use my own capital not in excess of \$1,000. I reside in Lee County. F.S 205.162
	I am a <b>widow with minor dependents</b> , with not more than one employee or helper, and will use my own capital not in excess of \$1,000. I reside in Lee County. I will provide a copy of the Death Certificate. F.S 205.162
	I am practicing as a <b>religious tenet</b> of a church as defined in F.S. 205.191.
	I am a <b>charitable organization</b> as defined in F.S. 205.192.
	I am a dealer, manufacturer, or employee of such who performs <b>mobile home set-ups</b> as defined in F.S 205.193.
	In no event will this local business tax receipt permit me to sell intoxicating liquors or malts and vinous beverages
	Proof of qualification must be provided.
	UNDER PENALTIES OF PERJURY, I HEREBY DECLARE THE STATEMENTS ABOVE ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.
Si	gnature of applicant: Date:

LBT Exemptions Rev.09/2018