I, ______________________________________________________ hereby certify that I qualify for the exemption from business taxes pursuant to Fla. Stat. §205 because (check all that apply):

- [ ] I have served in the United States Armed Forces and have been honorably discharged from service.
- [ ] I am a spouse or un-remarried spouse of an honorably discharged veteran of the U.S. Armed Forces.
- [ ] I am the spouse of an active duty military service member who has relocated to Pinellas County pursuant to a permanent change of station order.

Active duty military service members are not eligible for this exemption.

I understand to receive the exemption I am required to provide written proof of qualification for the exemption for which I am applying.

Meeting these qualifications shall entitle the applicant to an exemption from business taxes for all businesses of 99 employees or less, except those taxed by gross receipts or otherwise classified as “merchants” under City Code.

____________________________________________  _______________________________________
Signature of Applicant                             Date