



**Certificate of Use (CU) is due for renewal starting on June 1st and Local Business Tax Receipt (LBTR) on July 1st. Both are due before October 1 of each fiscal year.**

**ACCEPTABLE FORMS OF PAYMENT:**

All payments must reference the Business information to pay. Proof of renewal will be sent via mail to the corporate address on file.

a. **Email** with a Credit card form:

For Certificate of Use email: [CUSUBMITTALS@CITYOFSWEETWATER.FL.GOV](mailto:CUSUBMITTALS@CITYOFSWEETWATER.FL.GOV)

For Local Business Tax Receipt email: [LBTRSUBMITTALS@CITYOFSWEETWATER.FL.GOV](mailto:LBTRSUBMITTALS@CITYOFSWEETWATER.FL.GOV)

b. **By check**, payable to CITY OF SWEETWATER, BUILDING AND ZONING DEPARTMENT  
mailing address 1701 NW 112 AVE # 102 SWEETWATER FL, 33172

c. **In person**. On location hours MONDAY TO FRIDAY 9AM- 5PM.

Renewed Certificate of Use and Local Business Tax Receipts card must be posted on premises. Payments received between October 1st to December 31st, 2024, will incur late fees as specified under Chapter 25 and Chapter 62 of the city code.

Failure to renew the Certificate of Use before January 1st will be deemed null and void.

New application process will be required.

If the business is no longer active, inform us by email of its closing.



## City of Sweetwater

Address 1701 NW 112 AVE 102, SWEETWATER, FL 33172

Phone (305) 485-4526

### One Time Credit Card Payment Authorization Form

Sign and complete this form to authorize City of Sweetwater to make a onetime debit to your credit card listed below.

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

**3 % surcharge will be applied to each transaction made.**

**Please complete the information below:**

I \_\_\_\_\_ authorize City of Sweetwater to charge my credit card  
(Full name)  
account indicated below for \_\_\_\_\_ on or after \_\_\_\_\_. This payment  
(Amount) (Date)  
is for \_\_\_\_\_.  
(Description of goods/service)

Billing Address \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV2: \_\_\_\_\_

Account Type: Visa \_\_\_\_ Master Card \_\_\_\_ American express \_\_\_\_ Discovery \_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated only, and is valid for one time use only. I certify that I am an authorized use for this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.