Thank you for applying for a North Port Business Tax Receipt.

We are excited to announce that we have officially launched Accela, our new platform for processing all city documentation.

This new system will significantly streamline the process of applying for, receiving, and accessing your Business Tax Receipt.

Please use the links and resources below to register with the Accela Citizen Access portal and apply for your North Port Local Business Tax Receipt.

<u>ACA Link</u> <u>Instructional Video</u> BTR Application User Guide (Word Document Attached)

For general information, queries, and assistance with the updated process, please complete the form using the link below and a member of our Economic Development Staff will begin processing your request and contact you to assist.

Form Link

# Applying for a Business Tax Receipt in ACA

- 1. Navigate to the Accela Citizen Access (ACA) website and login.
  - a. <u>https://aca-prod.accela.com/NORTHPORT/Default.aspx</u>
  - b. If you do not have an account in ACA, please register for one. An instructional video detailing registration can be found below.
    - i. <u>https://www.youtube.com/watch?v=4UAisA\_bJWs&t=133s</u>
- 2. Once logged in, select "Business Tax" from the top row of links

FLORIDA Logged in as:John Vincent Schicitano Collections (0) E Cart (0) Account Management
Logged in as:John Vincent Schicitano Collections (0) 📜 Cart (0) Account Management
Search

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3. Select "Create an Application"

	Home	Planning	<b>Building Permits</b>	Code Enforcement	Business Tax	Fire
	Create	e an Applicat	ion Search Ap	plications	·	
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4. Confirm you have read the General Disclaimer by checking the box "I have read and accepted the above terms", then select "Continue Application".

			Logged in as:John Vincent Schicitano	Collections (0)	T Cart	0) Account Management	t Logo
					[	Search	Q
Home Planning	<b>Building Permits</b>	Code Enforcement	Business Tax Fire				
Create an Application Dolline Application Velcome to City of North rint your final record al	h Port, FL's Online Permitti	ng System. Using this syster your home or office, 24 hour	m you can submit and update information, pa rs a day.	y fees, schedule ins	pections, t	ack the status of your applica	tion, and
Create an Application Online Application Velcome to City of North rint your final record al Please "Allow Pop-up	h Port, FL's Online Permitti Il from the convenience of s from This Site" before plication can be saved to t	ng System. Using this system your home or office, 24 hour proceeding. You must accord	m you can submit and update information, pa rs a day. spt the General Disclaimer below before begin vicication will be automatically detend after 0	y fees, schedule ins ining your applicatio	pections, to on.	ack the status of your applica	tion, and
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5. Confirm if the business is an Insurance Company, then select "Continue Application"

Business Tax Receipt	Application			
1 Insurance Company Details	2 Location Details	3 Contact Details	4 Business Information	5 Review
Insurance Com	pany Information	ance company Details		* indicates a
	pany Information	ance company becans		*indicates a
Insurance Comp INSURANCE COMPANY Is the business an In	pany Information	○ Yes ○ No		<ul> <li>indicates a result of the second secon</li></ul>

6. Enter your address in the respective fields, then select "Search".

#### Step 2:Location Details >Location Details

* Street No.: 4970	Direction:	* Street Name: City Hall	Street Type: BLVD
Unit Type:	Unit No.:		
City: North Port	State:	* Zip: 34286	

7. If a selection box appears, select your address then click "Select"

Address Search Resu	lit List			
Addresses				
Showing 1-3 of 3				
Address	City	State Zip		
4970 CITY HALL BLVD, 2133, CITY H FL 34286, 4970 CITY HALL BLVD	ALL, NORTH PORT NORTH PORT	FL 342	86	
Associated Owners Showing 1-1 of 1				
Name	Address			
NORTH PORT CITY OF	4970 CITY HALL BLVD NO	ORTH PORT FL	34286-4100	

8. The remaining fields will automatically populate. Select "Continue Application" from the bottom right of the screen.

Owner	
Owner Name 1: O Owner Name 2: Owner Name 3:	
Address Line 1: 4970 CITY HALL BLVD	
Address Line 2:	
City: State: Zip: Country:	
NORTH HORT	
Save and resume later	Continue Applicatio

9. Select "Add New" under the Business Owner tab.

Business Tax Receipt A	pplication				
<sup>1</sup> Company Details	2 Location Details	3 Contact Details	4 Business Information	5 Review	6
Step 3:Contact De	tails > Contact Details			*inc	icates a require
					icutes a require
Business Owner					
Please select "New" to add a new	v Business Owner. Click "Edit" to edit your infor	mation.			
Add New Look	c Up				
Save and resume later				Continue	Application

10. Complete all required fields.

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Contact Information	
* First: Middle: *Last: Smith	
*Name of Business	
Example Business	
spell check	
* E-Mail: * Home Phone: examplebusiness@test.com 555555555	Work Phone:
Birth Date: 01/01/1979  SSN:  FEIN:  99999999999	

11. Select "Add Additional Contact Address"



12. Complete all fields, select "Save and Close"

Contact Address Information		
Address Type: Mailing		
Address Line 1: 4970 City Hall Blvd		
Address Line 2:		
Address Line 3:		
City:     State:     ZIP Code:       North Port     FL     34286		
Save and Close Save and Add Another	Clear	Discard Changes

### 13. Select "Continue".

	Contact address	s added su	cessfully.	
	Showing 1-1 of 1			
	Address Type	Recipient	Address	
	Mailing		4970 City Hall Blvd	
a.	Continue	Clear Dis	scard Changes	

## 14. Select "Continue Application"

af Contact added successfully			
John Smith coamplehumbest (Steat.com Home phones: S5555555 Hobile Phone: Vork Phone: Fax: Fax: Fax: Atd Additional Contact To the content address sheep() Marking Add Additional Contact	Address		
Showing 1-1 of 1			
Showing 1-1 of 1 Address Type Recipient	Address	Action	
Showing 1-1 of 1 Address Type Recipient Mailing	Address 4970 City Hall Blvd	Action Actions •	

a. 15. Complete all required fields, then select "Continue Application".

BUSINESS INFORMATION	
*Type of Business:	General Services 🔻
* Category:	Other Service Not Listed
• Please describe the business's primary activities.:	Example Business
* Select the current structure of the business.:	Incorporated Business (ST
* Is the business operating from a commercial location?:	Commercial 🔻
* Is a State license or certificate required for the business?:	● Yes () No
* Square footage of business (or sq ft of area in home used for business):	250
* How many employee(s) does the business have?:	5
Save and resume later	

16. Review the Exemption Eligibility page and select the option (if any) that apply to you. If no options apply, skip this page and select "Continue Application"

Exemption Eligibility		
EXEMPTION ELIGIBILITY If one or more of the following exemptions apply to the business that is applyin	ig for a Business Tax Receipt, please select it. Supporting documents are required.	
Veteran of the United States Armed Forces who was honorably discharged upon separation from service, or the spouse or un-remarried surviving spouse of such a veteran OR Spouse of an active duty military service member who has relocated to the county pursuant to a permanent change of station order:		
I am receiving public assistance as defined in F.S 409.2554 OR my household income is below 130% of the poverty level based on the current year's poverty guidelines.:		
I am a person who owns a majority interest in a business with fewer than 100 employees and I qualify for one of the following exemptions: 1) honorably discharged veteran, 2) spouse of an active-duty military member, 3) receiving public assistance, or 4) my household income in below 130% of the poverty level.:		
I am a disabled person incapable of manual labor OR a widow(er) with dependent children OR sixty-five (65) years of age or older AND I do not have more than one (1) employee AND I use my own capital only, which does not exceed one thousand dollars (\$1,000.00).:		
Charitable Institution: non-profit corporations operating physical facilities at which charitable services are provided, a reasonable percentage of which are without cost to those unable to pay. :		
Religious Institution: churches and ecclesiastical or denominational organizations or established places of worship at which non-profit religious services and activities are conducted. :		
Educational Institution: state tax-supported parochial, church and non-profit private schools, colleges or universities conducting regular classes and courses of study required for accreditation by or membership in th Southern Association of College and Secondary Schools, the Department of Education or the Florida Council of Independent Schools. Non-profit libraries, art galleries and museums open to the public are defined as educational institutions and are eligible for the exemption. :	a	
Farm Products: a person who sells farm, aquacultural, grove, horticultural, floricultural, tropical piscicultural o tropical fish farm products or products manufactured therefrom, when such products were grown or produced in the state by such person.:		
Save and resume later		Continue Application »

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17. This page will display which documents are required based on the information previously provided. Select "Add" to begin uploading documents.

State License or Certificate Business Emergency Information S	heet				
Solid Waste Approval Sunbiz Registration					
ness Tax Receipt Application					
2 Location Details 3 Contact	Details	4 Information	5 Review	6 Record Issuance	
tep 4:Business Information>Supporting Documents * indicates a required file					
cumonto					

ade;adp;bat;chn upload.	n;cmd;com;cpl;exe;hta;ht	m;html;ins;isp;jar;js;jse;l	ib;lnk;mde;mht;mhtml;msc;ms	sp;mst;php;pif;scr;sct;shb;sys;vb;vb;vbs;vxd;wsc;wsf;wsh are disallowed file type	es to
Name	Туре	Size	Latest Update	Action	
No records fou	ind.				
Add					

18. Select "Add" once more, then select the files from your device. Once complete, select "Continue".

xample bocament.par	100%
xample Document.pdf	100%
xample Document.pdf	100%
xample Document.pdf	100%

19. Select the document type from the "Type" dropdown for each document, then select "Save"

Remove
Remov
Remov
Remov

a.

20. Select "Continue Application" Step 4:Business Information>Supporting Documents

Documents					
The maximum file size allow ade;adp;bat;chm;cmd;co upload.	wed is 200 MB. om;cpl;exe;hta;htm;html;	ins;isp;jar;js;jse;lib;lnk;m	de;mht;mhtml;msc;msp;r	nst;php;pif;scr;sct;shb;sys;vb;vbe;vbs;vxd;wsc;wsf;ws	<b>h</b> are disallowed file types to
Name	Туре	Size	Latest Update	Action	
Example Document.pdf	Sunbiz Registration	80.72 KB	12/09/2024	Actions -	
Example Document.pdf	State License or Certificate	80.72 KB	12/09/2024	Actions 🗸	
Example Document.pdf	Solid Waste Approval	80.72 KB	12/09/2024	Actions -	
Example Document.pdf	Business Emergency Information Sheet	80.72 KB	12/09/2024	Actions 🗸	
Add					
Save and resume late	er				Continue Application »
				-	

\* indicates a required field.

21. Review your application, select the box confirming the attestation, then select "Continue Application" to submit your Business Tax Receipt application.

<sup>§</sup> Insurance Company Information	
Address	Edit
Parcel	Edit
<sup>ŷ</sup> Owner	Edit
▶ Business Owner	Edit
Business Information	
Exemption Eligibility	
℣Documents	Edit
I attest that the information provided is true and accurate to the best of my knowledge.	*
	v
By checking this box, I agree to the above certification.	Date: 12/09/2024
Save and resume later	Continue Application »