



City of Westlake
4001 Seminole Pratt Whitney Road
Westlake , Florida 33470
Phone: 561-530-5880
Fax: 561-790-1742

Certificate of Use Application

1. Application: A Certificate of Use application is to be submitted to the City of Westlake, Planning and Zoning Department, 4001 Seminole Pratt Whitney Road, Westlake, Florida 33471. The application must be filled out completely and notarized.

2. Submission: An original application; required documents; along with payment by check, payable to the City of Westlake in one of the following amounts:

- Commercial Address/Business \$250.00
- Home Occupation \$75.00
- Change of Owner/Business Name \$40.00
- Reissue Certificate Fee \$15.00

My Business Information

New Application _____ Address Change _____ Ownership Transfer _____ Change of DBABTR# _____

Company Name: _____

DBA (if applicable/must match signage): _____

Business Address: _____

Westlake, Florida _____ (zip code) Is this a virtual or residential office? Yes _____ No _____

FEIN: _____ (Federal Employee Identification Number)

Contact Name: _____

Email: _____

Phone No.: _____ Fax No.: _____

Mailing Address (if different than business address): _____

City: _____ State: _____ Zip Code: _____

Description of Services Offered: _____

My Business Documents:

All applicants shall provide a current copy of required documents (please attach):

Certificate of Use issued by the City of Westlake’s Planning and Zoning Department

Or, if a Sub-tenant: A copy of the Owner/Tenant’s Certificate of Use

A Letter acknowledging the sub-tenant’s use of Owner/Tenant’s Certificate of Use

Affidavit for Virtual Office Tenancy

Business Name Registration with the State of Florida (Fictitious Name Registration if applicable)

All Applicable Regulatory Licenses

My Certification

I hereby certify that all information given herein is true and accurate. I understand that providing false or misleading information on this application may subject me to criminal prosecution. I further understand that if there are any subsequent changes in the status of my business as stated above, that I will notify the City of Westlake of such changes.

Applicant’s Signature: _____ **Date:** _____

Print Name: _____ **Title:** _____

State of Florida

County of _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____,

by: Name of applicant: _____

Personally known _____ or produced identification _____

Notary Stamp:

Signature of Notary

Name of Notary, typed, printed or stamped

After your application has been reviewed and approved, a Certificate of Use will be issued and available for pick-up at the City of Westlake. It is the applicant's responsibility to call the City to confirm that the Certificate of Use is available.

Payment & Mailing Information

New Applications are to be hand delivered or mailed with the required documentation and payment to:

City of Westlake
4001 Seminole Pratt Whitney Road
Westlake, FL 33470 (561)530-5880