



FORM DV-A

DISABLED VETERAN'S EXEMPTION AFFIDAVIT

PRIOR TO ISSUANCE OF A "DAV EXEMPT LOCAL BUSINESS TAX RECEIPT", THE FOLLOWING PROOF MUST BE SUBMITTED IN ACCORDANCE WITH STATE STATUTE 205.055:

- 1) ANY **ONE** OF THE FOLLOWING:
 - A. A certificate of government rated disability to the extent of ten percent (10%) or more.
 - B. The affidavit or testimony of a reputable physician who personally knows the applicant and who makes the oath that the applicant is disable from performing manual labor as a means of livelihood.
 - C. The certificate of the Veteran's Service Office of Broward County duly executed under the hand and seal of the Chief Officer and Secretary thereof, attesting the fact that the applicant is disabled and entitled to receive a local business tax receipt within the meaning and intent of this section.
 - D. By production of a pension certificate issued to applicant by the United States by reason of such disability.
- 2) BROWARD COUNTY VOTER'S REGISTRATION CARD.
- 3) HONORABLE DISCHARGE CERTIFICATE FROM THE U.S. ARMED FORCES.
- 4) SOME FORM OF IDENTIFICATION.

THE BUSINESS FOR WHICH I MAKE THE APPLICATION IS CARRIED ON MAINLY BY MY PERSONAL EFFORTS AS A MEANS OF LIVELIHOOD.

Applicant's Signature _____
Date

Subscribed and sworn to before me this _____ day of _____,

Signature of Notary

Personally known to me _____
Produced identification _____
Type of identification _____

Print or type name of Notary

NOTE: Any person who operates any place for profit where dancing is permitted or where entertainment is provided for a charge, such as variety programs or exhibitions, and every fortuneteller, clairvoyant, palmist, astrologer, etc., shall not be exempt under this section.