

# FINANCE DEPARTMENT LOCAL BUSINESS TAX RECEIPT DIVISION

#### INTEROFFICE MEMORANDUM

TO:

Lieutenant Robert Manfre

Broward Sheriff's Office

THRU:

Nicki Satterfield

Finance Director

FROM:

Megan Jelaso

Revenue Coordinator

RE:

Request Background Check for Palmistry/Fortuneteller

Local Business Tax – Josie Johnson dba Psychic Readings at 219 N

Federal Hwy

DATE:

May 15, 2015

A request has been made for renewal of a local business tax receipt for a Palmistry/ Fortuneteller license. Section 12.5-2 of the Dania Beach Code of ordinances indicates such license is to be granted or reviewed by the City Commission on an annual basis.

The Renewal concerns the license of Josie Johnson dba Psychic Readings at 219 N Federal Hwy. The applicant will be given notice that a hearing will held before the City Commission meeting once this request is completed.

Section 12.5-2 (d) lists the criteria by which the City Commission may refuse or revoke renewal of a Fortuneteller's license. One of the steps in obtaining renewal is for the Chief of Police to check for any violations as stated in Section 12.5-2 (d). A copy of the code section is attached.

In order to process this request to be heard before the City Commission meeting, the background check for any/stated violations would need to be completed by <u>May 26,2015</u>. Please contact us should you have any questions.

Attachment

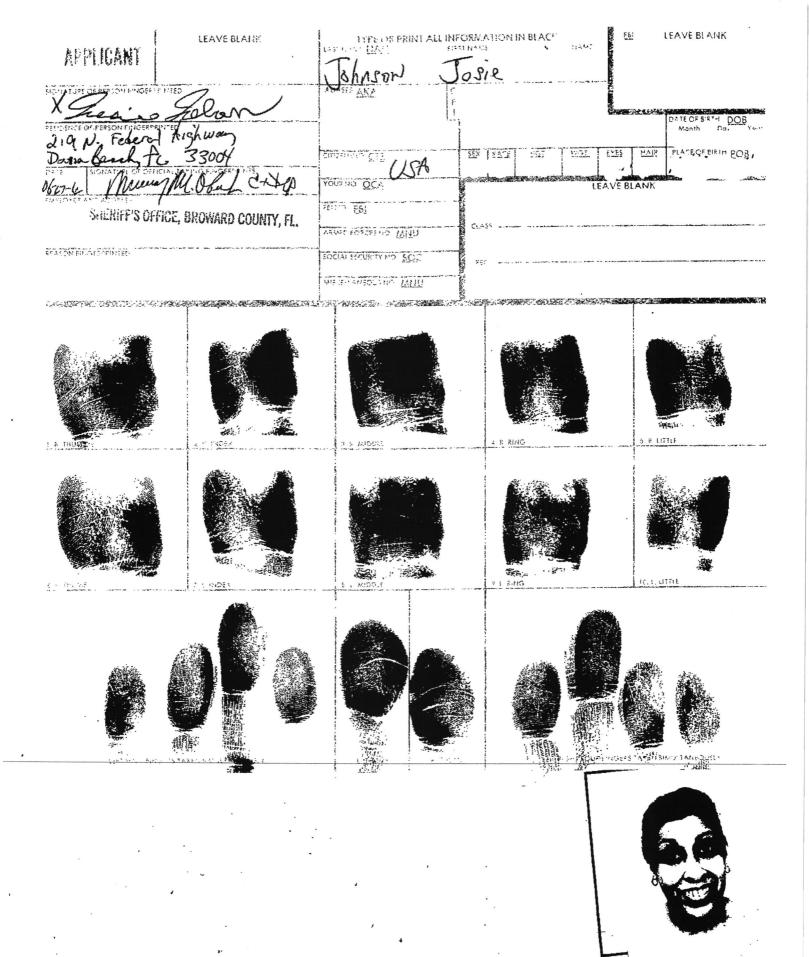
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Local Business Tax Receipt Division 100 W Dania Beach Blvd. Dania Beach, FL 33004 Phone: 954-924-6805 ext 3644 / Fax: 954-924-6812

Lic. #:	
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Fee:	
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Beach	Busines	s License Applica	tion of G	UVG		
				2 2012		
Date of Application:	71/01/080		שעו			
Property Folio: 50 1/1 *Please fill in all areas as ap	J 9 01 0000	- ADDIICATIONS WILL N	OT EXCEPTED	OFF		
*Please fill in all areas as ap  Business Information:	incasie (INCOMPLETE	AFFECTIONS WILLIA				
Name of Business: PS	ychic Read	dinas	Busin	ess Phone: _	154-839-671	0
D/B/A: Josiè	Johnson	٥	Busin	ess Fax:		· · · · · · · · · · · · · · · · · · ·
Business Address: 219	N FEDERAL	HWY DANIA BC	4 41 33004 Emer	gency #: 95	54-907 224	WALK
Mailing Address: 219 V	Federal Hwy.	DANIA Boh FI	33004 In an	Enterprise Z	one?	
<b>\</b> .	e psychic a	VAHOO. COMI	If yes	, # of Employ	ees:	
		, 191	of Revenue Sale &	Use Tax #:		
Federal ID (EIN) or Social S		///		DOB	Home Phone	
Business Owner(s) Name(s)	Ad	dress		LDOB	Clothe France	
reggy Lee	 I		was de la financia de			
Person Applying for License						
Name: )0518 -			Title:		(Within company)	
Phone: 954-839-6			Email: Jas	e psyc	NIC OVAHOO.CO	VI-1
Phone: 131 031 0	7. Cell Phone: 5		Linaii.	131		
Type of License Requested (	Check one please):					
New License	Transfer Ownership	Transfer Location	Home Based Occu	ipation		
Update License Informa	tion	Business Name Change				
Psych	ic Rendings	, Astrology19	and fortun	eteller	۲.	
Proposed Use:		•				
(Description of use MUST be	included with application	. Attach additional sheets o	n company letterhea	d as needed.	)	l
Specialized Information (Fill						
	Service Station:	Manufacturer:	Beauty Salon:	Re	al Estate:	
(Number of seats)	Number of pumps)	(Number of employees)	(Number of stations)	(N	umber of salespersons)	
Insurance/Sanitation Inform	ation (REQUIRED):					
Name of Insurance Co:			P	hone:		
Sanitation Company:			P	hone:		
I hereby certify that the about in this application may cause	e information is complete, the license to be revoked.	true and correct; and fur	her I understand tha	nt any missta	tement of facts contained	
7					1.12	
- Come	IRE OF APPLICANT	$\sim$		0 /- D	6-12 ATE	nic v Jacobski
The premises will be inspected corrected within the time all	d by the Ruilding Departs	nent and the Fire Preventi license may be denied, an	on Bureau. If any vio I possible Code Enfo	lations exist,	said violations must be	





**Department of Community Development Zoning Division** 

### **CERTIFICATE OF USE**

CERTIFICATE #: CU-12-0173 RECORD #: 001384

BUSINESS NAME: JOSIE JOHNSON/PEGGY LEE dba PSYCHIC READINGS

BUSINESS ADDRESS: 219 N FEDERAL HIGHWAY

BLDG #: BAY #:

**BUSINESS PHONE:** 954-839-6770

**BUSINESS USE(S): PSYCHIC READINGS/ASTROLOGY** 

PROPERTY ZONED: CC FOLIO #: 504234010080

CERTIFICATE APPROVED BY: Kristin Dion

DATE: 08/02/2012

LIMITATION(S): \*NOTES: EXISTING USE/CHANGE OF DBA

MUST BE POSTED AT BUSINESS LOCATION



COMMUNITY DEVELOPMENT DEPARTMENT ZONING DIVISION

100 W Dania Beach Blvd. Dania Beach, FL 30004 TEL: 954-924-6805 / FAX: 954-922-2687

CERTIFICATE OF USE APPLICATION

	6042590100
Name of Business: Psychic Rendings  Value of Business: Psychic Rendings  Value of Business: Psychic Rendings  Value of Business: Psychic Rendings	Property Zoned: <u>CC</u> Business Tel: 954-839-6770
Business Address: 219 N. Federal Hwy, Dania Bah Building # Bay/Suite #:  Email: OSIE PSYCHIC QYAhoo. com  Business Owner's Name: Peggy Lee  Business Owner's Address: 3015 W. Surrise Bivd  Business Owner's City/State/Zip: Ft. Laud F1 33311	Business Fax:  Emergency Tel: 954-907-2244  Square Ft of Bay/Space:  Multi-Tenant Bldg: [] Yes [] No  Home Tel: 954-839-6770  Alternate Tel: 954-907-2244
OF USE APPLIED FOR (CHECK ONE):	hange of Ownership  n)  Ne Residung S
NOTE: Application must be signed by business owner or authorized Signature  Signature  OSIC Johnson  Printed Name	lb 12
State of Florida: County of Broward:  The foregoing instrument was acknowledged before me this 31 day of Julian who is personally know to me or who has produced FLDL	
MOTARY PUBLIC (SEAL)  MY COMMISSION EXPIRES: 5/3d to  OFFICE USE ONLY: DO NOT COMPLETE BE  [ ] APPROVED: CERTIFICATE NUMBER:	



### Broward Sheriff's Office District 2 - Dania Beach Crime Prevention Unit 100 W Dania Beach Blvd Dania Beach, FL 33004 Phone # 954-926-2400



### Dania Beach Business Watch Membership Application (PLEASE PRINT)

Date: 1 14 12
Business Information
Business Name: PSychic Readings Business Address: 219 N. Federical Huy DANIA Beach, F1 3300 State: FL ZIP: 33004
City: Dania Beach State: FL State: FL Business Phone: 954-839-6770 Business Fax:
E-Mail Address: Josie Psychic @ yahoo, com  Hours of Operation: 10 Am - 11 pm
Owner / Manager Contact Information
Name: Josie Johnson Address: 219 N. Federal Hwy Dania Bch Fl 33004 Home Phone: 954-839-6770 Cellular: 321-388-1611
Emergency Contact Information
Name Telephone  Walter Hiller 954-907-2244
David Hiller 954-683-9639
Comments:
For information on this and other crime prevention programs, please contact our Crime Prevention Unit at 954.926.2400.
Zone #



Local Business Tax Receipt Division 100 W Dania Beach Blvd. Dania Beach, FL 33004 Phone: 954-924-6805 ext 3644 / Fax: 954-924-6812

# PROPERTY OWNER/LANDLORD AUTHORIZATION TO ISSUE LICENSE

I CERTIFY THAT I AM THE PROPERTY OWNER AND/OR AUTHORIZED AGENT OF THE PREMISES  LOCATED AT: 219 North Federal Highway, Dania Beach, FL 33004  LESSEE BAY/UNIT/SUITE #(S): NA FOLIO #: 504234-01-0080  AND HAVE LEASED SAID PREMISES TO: Peggy Lee and Josie Johnson.  FOR THE PURPOSE OF CONDUCTING HIS/HER BUSINESS OF: Psychic
I FURTHER UNDERSTAND THAT THE BUILDING WILL BE INSPECTED BY THE CITY OF DANIA BEACH INSPECTORS AND AGREE THAT ANY VIOLATIONS (STRUCTURAL, ELECTRICAL, PLUMBING, MECHANICAL, AND/OR FIRE PREVENTION) WILL BE CORRECTED BY ME OR THE LESSEE. I ALSO UNDERSTAND THAT NO ALTERATIONS OR ADDITIONS WILL BE MADE WITHIN OR TO THE PREMISES UNTIL THE PROPER PERMITS HAVE BEEN PROCURED. IN ADDITION, NO SIGNS WILL BE ALTERED OR INSTALLED UPON THE PREMISES WITHOUT THE PROPER PERMITS BEING PULLED. LASTLY, ANY VIOLATIONS NOT CORRECTED MAY BE CITED BY THE CODE COMPLIANCE DIVISION, WHICH PURSUANT TO FLORIDA STATE STATUTES, I AM HELD ULTIMATELY RESPONSIBLE FOR REGARDLESS OF ANY LEASE CONDITIONS OR AGREEMENTS WITH THE LESSEE.
SIGNATURE OF OWNER OR AGENT PRINTED NAME
OWNER 631-789-6500 7-12-12 PHONE NUMBER DATE
State of Florida: NEW YORK  County of Broward: NASSAU.  The foregoing instrument was acknowledged before me this 12 day of JULY,  who is personally known to me or who has produced DRNEP LICENSE as identification, and who did (or did not) take an oath.
DARLENE I. CASTRO Notary Public, State of New York No. 01CA6133993 Qualified in Nassau County Commission Expires Sept. 19, 2013



**NOTARY PUBLIC** 

MY COMMISSION EXPIRES:

## CITY OF DANIA BEACH

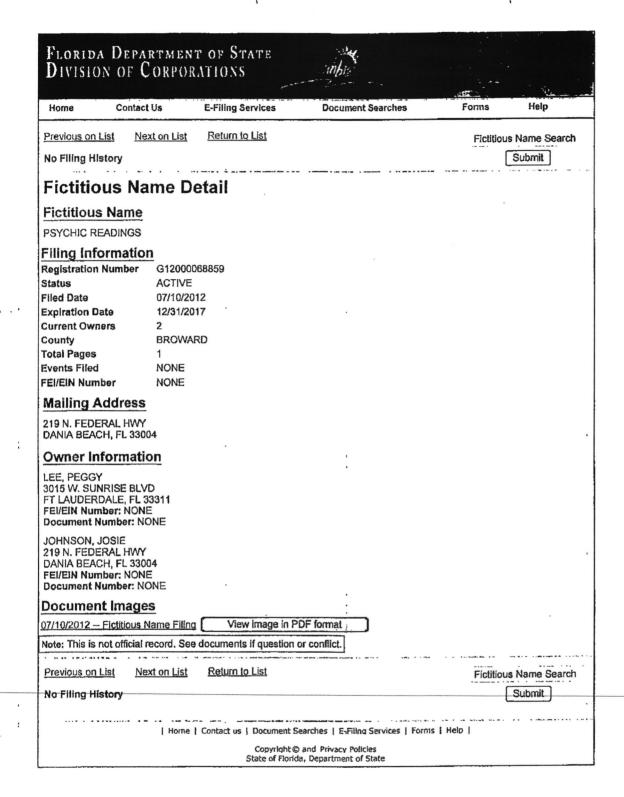
Local Business Tax Receipt Division 100 W Dania Beach Blvd. Dania Beach, FL 33004 Phone: 954-924-6805 ext 3644 / Fax: 954-924-6812

### AFFIDAVIT OF INVENTORY

If your business carries an inventory of merchandise, you must have this affidavit properly executed and returned to the Division along with the completed application form(s). This does not include equipment, furniture, or other items used in the day to day operations of the business.

I certify that the average dollar (\$) value of inventory maintained on the site of is\$ NAME OF BUSINESS \*Please fill in areas where applicable Value of Inventory as Retail Product: \$ \_\_\_\_ Percent of Inventory as Retail Product: \_\_\_\_\_\_% Value of Inventory as Wholesale Product: \$\_\_\_\_\_ Percent of Inventory as Wholesale Product: \_\_\_\_\_% Square Feet Total of Storage and/or Warehouse Space: TITLE SIGNATURE OF OWNER OR OFFICER DATE PRINTED NAME State of Florida: County of Broward: The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_ who is personally know to me or who as identification, and who did (or did not) take an oath. has produced \_\_

(SEAL)



### APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

REGISTRATION# G12000068859

Fictitious Name to be Registered: PSYCHIC READINGS

Mailing Address of Business:

219 N. FEDERAL HWY DANIA BEACH, FL 33004

Florida County of Principal Place of Business: BROWARD

FEI Number:

FILED Jul 10, 2012 Secretary of State

Owner(s) of Fictitious Name:

LEE, PEGGY 3015 W. SUNRISE BLVD FT LAUDERDALE, FL 33311

JOHNS ON, JOSIE 219 N. FEDERAL HWY DANIA BEACH, FL 33004

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in Chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the electronic signature below shall have the same legal effect as if made under oath and I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, Florida Statutes.

PEGGYLEE	07/10/2012		
Electronic Signature(s)	Date		
ì			

Certificate of Status Requested ( )

Certified Copy Requested (X)

# Lexon Insurance Company 1919 S. Highland Avenue, Bidg.A-Suite 300, Lombard, Illinois 60148-4979

**BOND NO. 1017442** 

# LICENSE AND/OR PERMIT BOND (ONLY VALID IF FILLED IN FOR LESS THAN \$25,001.00)

KNOW ALL MEN BY THESE PRESENTS:		
That we JOSIE JOHNSON		
219 N FEDERAL HIGHWAY DANIA BEAG	(Principal's Name) CH. FL. 33004	
as Principal, and Lexon Insurance Company	(Principal's Address)	
State of Texas, as Surety, are held and firmly bo	an instraince company duly	licensed In the
State of Texas, Obligee, in the aggregate sum o to the payment of which sum the said Princip executors, successors and assigns, jointly and so	of One Thousand Dollars Dollars (\$1.00)  all and Surety bind themselves and their heirs, and everally by these presents.	administrators,
In consideration thereof, the Principal is gra	inted a license and/or permit by the Obligee to	engage in the
business of PSYCHIC READER		
for the period beginning on the 26TH	day of JULY	2012
and ending on the 25TH	day of JULY	2013
executed by the Surety;  2. This obligation may be cancelled by the	ear to year at the potion of the Surety, by continual Surety upon giving thirty (30) days written notice force and effect as to the acts or omissions of the about.	to the Oblinee
Dated this 26 TH	day of JULY	2012
<b>1</b>	JOSIE JOHNSON	•
a		Principal
Υ		Officer
ài		
D!	Lexon Insurance Company	
	BY: On Kouce	Fact
	Jaines K Swindle, Attorney In	ract
	Thereset 1 to	

#### **POWER OF ATTORNEY**

LX-86780

## Lexon Insurance Company

its true and lawful Attorney(s)-In-Fact to make, execute, seal and deliver for, and on its behalf as surety, any and all bonds, undertakings or other writings obligatory in nature of a bond.

This authority is made under and by the authority of a resolution which was passed by the Board of Directors of LEXON INSURANCE COMPANY on the 1st day of July, 2003 as follows:

Resolved, that the President of the Company is hereby authorized to appoint and empower any representative of the Company or other person or persons as Attorney-in-Fact to execute on behalf of the Company any bonds, undertakings, policies, contracts of indemnity or other writings obligatory in nature of a bond not to exceed \$2,500,000.00, Two-million five hundred thousand dollars, which the Company might execute through its duly elected officers, and affix the seal of the Company thereto. Any said execution of such documents by an officers of the Company. Any Attorney-in-Fact, so appointed, may be removed for good cause and the authority so granted may be revoked as specified in the Power of Attorney.

Resolved, that the signature of the President and the seal of the Company may be affixed by facsimile on any power of attorney granted, and the signature of the Vice President, and the seal of the Company may be affixed by facsimile to any certificate of any such power and any such power or certificate bearing such facsimile signature and seal shall be valid and binding on the Company. Any such power so executed and sealed and certificate so executed and sealed shall, with respect to any bond of undertaking to which it is attached, continue to be valid and binding on the Company.

IN WITNESS THEREOF, LEXON INSURANCE COMPANY has caused this instrument to be signed by its President, and its Corporate Seal to be affixed this 21st day of September, 2009.

TEXAS INSURANCE COMPANY

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de ice LEXON INSURANCE COMPANY

David E. Campbell

#### **ACKNOWLEDGEMENT**

On this 21st day of September, 2009, before me, personally came David E. Campbell to me known, who being duly sworn, did depose and say that he is the President of LEXON INSURANCE COMPANY, the corporation described in and which executed the above instrument; that he executed said instrument on behalf of the corporation by authority of his office under the By-laws of said corporation.

"OFFICIAL SEAL"
MAUREEN K. AYE
Notary Public, State of Illinois
My Commission Expires 09/21/13

CERTIFICATE

Maureen K. Aye

I, the undersigned, Secretary of LEXON INSURANCE COMPANY, A Texas Insurance Company, DO HEREBY CERTIFY that the original Power of Attorney of which the foregoing is a true and correct copy, is in full force and effect and has not been revoked and the resolutions as set forth are now in force.

Signed and Sealed at Woodridge, Illinois this

Day of July , 20 /2

TEXAS INSURANCE -COMPANY

Donald D. Buchanan Secretary

"WARNING: Any person who knowingly and with Intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties."

Nature of business. At 219 N. Federal Hwy., Dania Beach, FL 33004

Psychic readings, astrology readings, fortune-telling,

07/16/12

## To Whom It May Concern,

I, James Andriella Jr. have known Josie Johnson for Seven years. I have been living in Broward county for 32 years. A property owner in the City of Pembroke Pines FL 33024 Since 1980

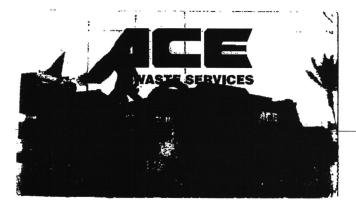
For the years I have known Josie Johnson and her work ethics and business responsibilities at 219 N Federal Hwy Dania Beach I feel good about her way in conducting business. If you have any further questions you can contact me via mail or email.

James Andriella Jr

8520 NW 3Rd St.

Pembroke Pines FL 33024

Cell 954-562-8534



To Whom It May Concern,

I, Ines Ramirez, have known Josie Johnson for twenty years. I have been living in Broward county for seven years. A property owner in the City of Hollywood.

For all the years I have known Mis Johnson and her work ethics and business responsibilities I feel good about her way in conducting business. If you have any further questions you can contact me via mail or email.

Ines Ramirez 2738 Fillmore Street Unit 10W Hollywood, Florida 33020

email: inesr511@yahoo.com

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Chapter 12.5 - FORTUNETELLERS, PALMISTS, CLAIRVOYANTS AND ASTROLOGERS FOOTNOTE(S):

--- (1) ---

**Editor's note**—Ord. No. 20-90, §§ 1—8, adopted April 10, 1990, did not specifically amend the Code; hence inclusion herein as Ch. 12.5, §§ 12.5-1—12.5-8, was at the discretion of the editor. Sections 9—12, providing for separability, codification, repeal of conflicting provisions and an effective date, have been omitted from codification.

Cross reference— Business tax, Ch. 15; fortunetelling for illegal purposes, § 17-7.

Sec. 12.5-1. - Business tax receipt required.

It shall be unlawful to engage in the business of fortunetelling, palmistry, clairvoyancy or astrology in the city unless such business is conducted by an individual who has applied for and obtained a business tax receipt from the city for such business.

(Ord. No. 20-90, § 1, 4-10-90)

Sec. 12.5-2. - Issuance and revocation of business tax receipt.

- (a) The city commission of the City of Dania Beach, Florida, is hereby authorized to grant or renew a fortunetelling, palmistry, clairvoyancy or astrology business tax receipt for any period of time not exceeding one (1) year to any individual applying therefor on a form to be provided for in paragraph (b) of this section and the filing by the applicant of the bond required by section 12.5-5 of this chapter.
- (b) The form on which application shall be made for a fortunetelling, palmistry, clairvoyancy or astrology business tax receipt shall require the following information:
  - (1) Name of applicant;
  - (2) Residence and business address of applicant;
  - (3) The length of time for which a fortunetelling, palmistry, clairvoyancy or astrology business tax receipt is desired;
  - (4) A statement as to whether or not the applicant holds, or has held a fortunetelling, palmistry, clairvoyancy or astrology license from any state, municipality, governing body or licensing authority; a list of such licenses and a statement of the time, place and by whom issued; a statement as to whether any state, municipality, governing body or licensing authority has ever refused to issue or to renew a fortunetelling, palmistry, clairvoyancy or astrology license to the applicant together with a full and accurate statement as to the reasons for any such refusal; and a statement as to whether any state, municipality, governing body or licensing authority has ever revoked a fortunetelling, palmistry, clairvoyancy or astrology license held by the applicant together with a full and accurate statement as to the reasons for any such revocation;
  - (5) A statement as to whether or not the applicant has ever been convicted of any crime, misdemeanor or violation of any municipal ordinance, and if so, the nature of the offense and the punishment or penalty assessed thereto;

about:blank 5/13/2015

- (6) A photograph of the applicant, taken within sixty (60) days immediately prior to the date of the filing of the application, which picture shall be two (2) inches by two (2) inches showing the head and shoulders of the applicant in a clear and distinguishing manner, except that the city commission may waive this requirement with respect to an application for renewal of a fortunetelling, palmistry, clairvoyancy or astrology business tax receipt by an individual holding an unexpired fortunetelling, palmistry, clairvoyancy or astrology business tax receipt issued under this chapter who has in a previous application under this chapter complied with this requirement;
- (7) The fingerprints of the applicant and the names of at least two (2) reliable property owners of the County of Broward, State of Florida, who will certify as to the applicant's good moral character and business responsibility, except that the city commission may waive this requirement with respect to an application for renewal of a fortunetelling, palmistry, clairvoyancy or astrology business tax receipt by any individual holding an unexpired business tax receipt issued under this chapter who has in a previous application under this chapter complied with this requirement.
- applying therefor, the city commission shall refer the application to the Broward County Sheriff's Office who shall cause to be made such investigation of the applicant's moral character and business responsibility as he deems necessary for the protection of the public good, except that the city commission may waive this requirement with respect to an application for renewal of an existing business tax receipt by any individual holding an unexpired fortunetelling, palmistry, clairvoyancy or astrology business tax receipt issued under this chapter if an investigation of such applicant's moral character and business responsibility has previously been made under this section in connection with a prior application for such business tax receipt under this chapter. The sheriff or his deputy shall cause the investigation herein provided for to be made within a reasonable time and shall certify to the city commission whether or not the moral character and business responsibility of the applicant is satisfactory.
- (d) A fortunetelling, palmistry, clairvoyancy or astrology business tax receipt may be revoked by the city commission or an application for issuance or renewal of such business tax receipt may be refused by the city commission, if they determine after notice and hearing that:
  - (1) The applicant or business tax receipt holder is not an individual of good moral character and business responsibility; or
  - (2) The application of the applicant or business tax receipt holder contains any false, fraudulent or misleading material statement;
  - (3) The applicant or business tax receipt holder has perpetrated a fraud upon any person whether or not such fraud was perpetrated in the conduct of the business in the city; or
  - (4) The applicant or business tax receipt holder has violated any of the statutes of the State of Florida relating to fortunetelling, palmistry, clairvoyancy or astrology; or
  - (5) The applicant has been convicted of any crime or misdemeanor involving moral turpitude; or
  - (6) The applicant or business tax receipt holder has conducted his or her business in the city in an unlawful manner or in such a manner as to constitute a breach of the peace or a menace to the health, safety or general welfare of the public.

(e)

Notice of the hearing provided for in paragraph (d) above shall be given in writing to the applicant or business tax receipt holder as the case may be. Such notice shall be mailed, postage prepaid to the applicant or business tax receipt holder as the case may be at his last known address at least five (5) days prior to the date set for hearing. The applicant or business tax receipt holder as the case may be shall have the right to be represented at such hearing by counsel.

(Ord. No. 20-90, § 2, 4-10-90; Ord. No. 2007-004, § 3, 3-27-07)

Sec. 12.5-3. - Judicial remedy by circuit court.

Any person aggrieved by any decision of the city commission may, within thirty (30) days from the date of rendition of such decision, apply to the circuit court for the Seventeenth Judicial Circuit in and for Broward County, Florida, for a review of such decision of the city commission, which said review shall be limited to a petition at common law for a writ of certiorari.

(Ord. No. 20-90, § 3, 4-10-90)

Sec. 12.5-4. - Business tax receipt fees.

The fees for a fortunetelling, palmistry, clairvoyancy or astrology business tax receipt shall be in the sum of one thousand dollars (\$1,000.00) for each twelve-month period or fraction thereof.

(Ord. No. 20-90, § 4, 4-10-90; Ord. No. 2007-004, § 3, 3-27-07)

Sec. 12.5-5. - Bond.

Every applicant for a fortunetelling, palmistry, clairvoyancy or astrology license shall file with the clerk-auditor of the city a surety bond running to the City of Dania Beach, Florida, in the amount of one thousand dollars (\$1,000.00) with surety acceptable to and approved by the city commission conditioned that the applicant, if issued a fortunetelling, palmistry, clairvoyancy or astrology license, will comply fully with all the provisions of the ordinances of the city, and the statutes of the State of Florida and will pay all damages which may be sustained by any person by reason of any fraud, deceit, negligence or other wrongful act on the part of the licensee, his agent or employees in the conduct of the licensee's business. A liability insurance policy issued by an insurance company authorized to do business in the State of Florida which conforms to the above requirements may be permitted by the city commission in its discretion in lieu of a bond.

(Ord. No. 20-90, § 5, 4-10-90)

Sec. 12.5-6. - Place of conducting activities.

No fortunetelling, palmistry, clairvoyancy or astrology activities shall be conducted within any of the residential areas of the city or other areas not zoned for such activity.

(Ord. No. 20-90, § 6, 4-10-90)

Sec. 12.5-7. - New applications and renewals.

The provisions of this chapter shall apply to all new applicants for business tax receipts for fortunetelling, palmistry, clairvoyancy or astrology activities and for all renewals of licenses issued for fortunetelling, palmistry, clairvoyancy or astrology activities that are in effect at the time of the effective date of this chapter.

(Ord. No. 20-90, § 7, 4-10-90; Ord. No. 2007-004, § 3, 3-27-07)

Sec. 12.5-8. - Penalties.

Any person violating any of the provisions of this chapter shall be deemed guilty of a misdemeanor and upon conviction thereof shall be fined not exceeding five hundred dollars (\$500.00) or by imprisonment in the county jail not exceeding ninety (90) days, or by both such fine and imprisonment. Each violation shall constitute a separate offense and shall be punishable as such hereunder.

(Ord. No. 20-90, § 8, 4-10-90)

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