




Fee Schedule¹
for
Floating Structures and Commercial Vessels²
Operating in the Crab Island Entertainment Area

 **Commercial vessels** shall pay a monthly fee of **\$400** for each month or for any portion of a month that the commercial vessel operates in the Crab Island Entertainment Area.

 **Floating structures** occupying **less than 1,500 square feet** shall pay a monthly fee of **\$1,500** for each month or for any portion of a month that the floating structure operates in the Crab Island Entertainment Area.

 Floating structures occupying **1,500 square feet or more** shall pay a monthly fee of **\$2,000** for each month or for any portion of a month that the floating structure operates in the Crab Island Entertainment Area.

Licenses may be purchased on a month-to-month basis.

¹ Effective February 18, 2020. Subject to change by the Board of County Commissioners.

² Charter fishing services or commercial vessels that do not operate within the Crab Island Entertainment Area nor allow passengers to disembark within the boundaries of the Area are not subject to the requirements of this section.



Department of Growth Management

1250 N Eglin Parkway Room 319

Shalimar, FL 32579

Tel. 850-651-7180 Fax 850-651-7706

Crab Island Commercial Vessel License Application

This application is established under the authority of Section 19-81 of the Code of Ordinances of Okaloosa County, Florida pursuant to County Ordinance 18-19 adopted on July 17, 2018 as amended by County Ordinance 20-03 adopted February 18, 2020

1. Name of Owner:

2. Owner's Address:

3. Owner's email and telephone:

If vessel is to be operated by someone other than the owner, please complete sections 4, 5, and 6. If owner is also the operator, write "owner" in the spaces provided and proceed to sections 7 through 13.

4. Name of Operator:

5. Owner's Address:

6. Operator's email and telephone: _____

7. Business Name: _____

8. Type of business: _____

Example 1: Floating hamburger stand providing burgers, hot dogs, and soft drinks Example 2: Floating paddle board rental business

9. Description of vessel and Registration Number: _____

Registration Number: _____

Example: 20' Boston Whaler painted white named "Ice Cream Man"

10. Are restrooms to be provided and if so, how will waste be held and disposed of?

Example: Wastewater will be held in a 200 gallon holding tank which will be pumped daily.

11. Please attach copy of County Business Tax Receipt _____ (must be attached)

12. Please attach copies of following licenses/permits as required based on use (place check by all that are attached):

_____ Mobile Food Dispensing License (DBPR)

_____ Fire/Hood Suppression (e.g. ANSUL System)

_____ National Park Service Commercial Use Authorization Permit (**Mandatory for floating structures utilizing Crab Island Recreation Area**)

_____ Other, please specify and attach copies:

13. **Duration of requested license:** _____ to _____
As provided in Section 19-80(4) of the Code of Ordinances of Okaloosa County, Florida.

14. **Acknowledgement and Signature:** By signing this application form I am representing that all the information provided herein is true and accurate, and that any license issued pursuant to this application may be subject to revocation if it is discovered that untrue or inaccurate information was used in completing this form.

Signature Owner of Floating Structure or Authorized Agent*

Date

Printed Name of Owner/Authorized Agent

*If authorized agent, this form **MUST** be accompanied by notarized affidavit signed by the owner specifically authorizing the agent to submit the application.



State of Florida

Department of Growth Management

1250 N Eglin Parkway Room 319

Shalimar, FL 32579

Tel. 850-651-7180 Fax 850-651-7706

Floating Structure License Application

This application is established under the authority of Section 19-80(4) of the Code of Ordinances of Okaloosa County, Florida pursuant to County Ordinance 18-19 adopted on July 17, 2018 as amended by County Ordinance 20-03 adopted February 18, 2020

1. Name of Owner:

2. Owner's Address:

3. Owner's email and telephone:

If floating structure is to be operated by someone other than the owner, please complete sections 4, 5, and 6. If owner is also the operator, write "owner" in the spaces provided and proceed to sections 7 through 13.

4. Name of Operator:

5. Owner's Address:

6. Operator's email and telephone: _____

7. Business Name: _____

8. Type of business: _____

Example 1: Floating hamburger stand providing burgers, hot dogs, and soft drinks Example 2: Floating paddle board rental business

9. Description of structure and Square Footage of Structure: _____

Square Footage: _____

Example: Fiberglass and wood structure attached to 30 foot pontoon boat providing food preparation area, customer service counter, and storage space. 1,200 square feet

10. Are restrooms to be provided and if so, how will waste be held and disposed of?

Example: Wastewater will be held in a 200 gallon holding tank which will be pumped daily.

11. Please attach copy of County Business Tax Receipt _____ (must be attached)

12. Please attach copies of following licenses/permits as required based on use (place check by all that are attached):

_____ Mobile Food Dispensing License (DBPR)

_____ Fire/Hood Suppression (e.g. ANSUL System)

_____ National Park Service Commercial Use Authorization Permit (**Mandatory for floating structures utilizing Crab Island Recreation Area**)

_____ Other, please specify and attach copies:

13. **Duration of requested license:** _____ to _____
As provided in Section 19-80(4) of the Code of Ordinances of Okaloosa County, Florida..

14. **Acknowledgement and Signature:** By signing this application form I am representing that all the information provided herein is true and accurate, and that any license issued pursuant to this application may be subject to revocation if it is discovered that untrue or inaccurate information was used in completing this form.

Signature Owner of Floating Structure or Authorized Agent*

Date

Printed Name of Owner/Authorized Agent

*If authorized agent, this form **MUST** be accompanied by notarized affidavit signed by the owner specifically authorizing the agent to submit the application.