




## Application for a Florida Farm Tax Exempt Agricultural Materials (TEAM) Card

Section 1. Business Information		
Florida Business Partner (BP) Number (if currently registered with the Florida Department of Revenue for tax purposes):	Federal Employer Identification Number (FEIN):	
	Social Security Number (sole proprietors only):	
Legal Name of Business (if applying as an individual/sole proprietor use first name, middle initial, and last name):		
Trade Name (doing business as or DBA) if applicable:		
<p><b>Form of Business Ownership: (select only one form of ownership)</b></p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><input type="checkbox"/> Sole Proprietor (individual owner)</p> <p><input type="checkbox"/> Partnership <b>(select one below):</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Married couple</li> <li><input type="checkbox"/> General partnership</li> <li><input type="checkbox"/> Limited liability partnership (LLP)</li> <li><input type="checkbox"/> Limited partnership (LP)</li> <li><input type="checkbox"/> Joint venture</li> </ul> <p><input type="checkbox"/> Corporation <b>(select one below):</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> C Corporation</li> <li><input type="checkbox"/> S Corporation</li> <li><input type="checkbox"/> Not-for-profit</li> <li><input type="checkbox"/> Foreign corporation</li> </ul> <p><input type="checkbox"/> Other _____</p> </div> <div style="width: 45%;"> <p><input type="checkbox"/> Limited liability company (LLC)</p> <p><b>(select one below):</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Single member</li> <li><input type="checkbox"/> Multi-member</li> </ul> <p><b>If single member</b>, select the box that applies to how your LLC is treated for federal income tax.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> C Corporation</li> <li><input type="checkbox"/> S Corporation</li> <li><input type="checkbox"/> Disregarded (reported by single member)</li> </ul> <p><b>If multi-member</b>, select the box that applies to how your LLC is treated for federal income tax.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Partnership</li> <li><input type="checkbox"/> C Corporation</li> <li><input type="checkbox"/> S Corporation</li> </ul> </div> </div>		
What is the primary agricultural commodity you are in the business of producing? _____		
Provide the North American Industry Classification System (NAICS) code for your primary agricultural commodity. If you do not know your NAICS code, go to <b>census.gov/naics</b> and enter a keyword to search the most recent NAICS list. _____		
Mailing Address:		
City:	State:	ZIP:
<p>Social security numbers are used by the Florida Department of Revenue as unique identifiers for the administration of Florida's taxes. Social security numbers obtained for tax administration purposes are confidential under sections 213.053 and 119.071, Florida Statutes (F.S.), and not subject to disclosure as public records. Collection of your social security number is authorized under state and federal law. Visit the Department's website at <b>floridarevenue.com/privacy</b> for more information regarding the state and federal law governing the collection, use, or release of social security numbers, including authorized exceptions.</p>		



### Section 2. Qualifying Questions

**Applicant must meet one of the following criteria to qualify for a Florida TEAM Card.**

- Are you a farmer whose property is classified as agricultural by the county property appraiser pursuant to section (s.) 193.461, F.S.?
  - Yes.  
Provide the physical address of the property and parcel number in the space provided below then proceed to the Number of TEAM Cards Requested. If you own multiple qualifying properties, provide the address and parcel number of the largest qualifying property.
  - No. Proceed to next question.
- Are you a farmer who has implemented best management practices (BMP) adopted by the Department of Agriculture and Consumer Services (DACS) pursuant to s. 403.067(7)(c)2., F.S. on property you own or lease?
  - Yes.  
I have implemented BMP on property I:
    - Own
    - Lease (**A copy of the Lease agreement must be submitted with your application.**)
 BMP Type:
    - Aquaculture
    - Silviculture
    - Other \_\_\_\_\_
 Provide the physical address of the property and parcel number in the space provided below then proceed to the Number of TEAM Cards Requested. If you own multiple qualifying properties, provide the address and parcel number of the largest qualifying property.
  - No.  If you answered no to both questions, you do not qualify for a Florida TEAM card. Farmers that do not qualify for a TEAM Card may continue using the *Suggested Purchaser's Exemption Certificate* provided in Rule 12A-1.087, F.A.C., to claim applicable sales tax exemptions on items for agricultural use.

\_\_\_\_\_ Address

\_\_\_\_\_ Parcel Number

\_\_\_\_\_ City, State, ZIP

\_\_\_\_\_ County

**Number of TEAM Cards Requested:** \_\_\_\_\_ (quantity limit of 10 cards)

### Section 3. Contact Information

Name of Contact Person:

Contact Person's Phone Number:

Contact Person's Email Address\*:

\* Email addresses provided to the Department for tax administration purposes are confidential and exempt from disclosure pursuant to s. 213.053(2), F.S.

Your privacy is important to the Department. To protect your privacy, access to personal information about your business is limited to the person who has signed this application for a Florida Farm Tax Exempt Agricultural Materials (TEAM) Card. To ensure that information is not provided without your consent, a written request from you is required if you wish to receive a secure email regarding this application. If so, the Department will send information regarding this application using its secure email software. This software will require additional steps before you can access the information. If you do not want to receive information by email, any information regarding this application will be mailed to you.

- I authorize the Florida Department of Revenue to send information regarding this application for a Florida Farm Tax Exempt Agricultural Materials (TEAM) Card using the Department's secure email. I understand that this method requires additional steps to view the information provided.



**Section 4. Applicant Signature**

I certify that I am authorized to execute this application and meet the qualifying criteria selected in Section 2. I further certify that, if granted, the Florida Farm Tax Exempt Agricultural Materials (TEAM) Card will only be used to claim the applicable agricultural sales tax exemptions provided in s. 212.08, F.S.

Under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

**General Information**

**What is a Florida Farm Tax Exempt Agricultural Materials (TEAM) Card?**

The TEAM card is a sales tax exemption card for use by qualified farmers to claim the applicable sales tax exemptions on items for agricultural use. Farmers may present the TEAM card to the selling dealer instead of paper exemption certificates.

The TEAM card does not expand or create agricultural exemptions beyond those provided in s. 212.08, F.S.

**Who Qualifies for a Florida TEAM Card?**

A farmer whose real property is classified as agricultural pursuant to s. 193.461, F.S.

OR

A farmer who has implemented agricultural best management practices adopted by the Department of Agriculture and Consumer Services (DACS) pursuant to s. 403.067(7)(c)2., F.S., on property it owns or leases.

A **farmer** is a person, such as an individual, corporation, partnership, or limited liability company directly engaged in the business of producing crops, livestock, or other agricultural commodities. The term includes, but is not limited to, horse breeders, nurserymen, dairy farmers, poultry farmers, cattle ranchers, apiarists, and persons raising fish. (See ss. 212.02(2), 212.02(12), and 212.02(28), F.S.)

If you do not meet one of the above qualifying criteria, you are not eligible for a TEAM card. Farmers that do not qualify for a team card may continue to use paper exemption certificates. (See Rule 12A-1.087, F.A.C.)

**How Do I Apply for a TEAM Card?**

Complete and submit the *Application for a Florida Farm Tax Exempt Agricultural Materials (TEAM) Card* (Form DR-1 TEAM) and any required documentation to the Florida Department of Revenue (Department). For documentation requirements see Question 2, Page 2. The Department will notify you if additional information or documentation is needed to determine if you qualify.

**How to Submit Forms and Documentation**

Apply online at [floridarevenue.com/forms](http://floridarevenue.com/forms).

**By Mail:**

Account Management – MS 1-5730  
Florida Department of Revenue  
PO Box 6480  
Tallahassee FL 32314-6480

If your application is approved, the Department will notify DACS and they will issue you a TEAM card(s).

**Do TEAM Cards Expire?**

Yes. TEAM cards expire 5 years after the date of issuance as shown on the TEAM card. At the end of the five-year period, the Department will use available information to determine whether you continue to qualify for the TEAM card. (See s. 212.084, F.S.)

The Department will notify DACS to issue you a new TEAM card(s) when your eligibility can be established.



The Department will issue you a request for documentation when it is unable to determine your eligibility to receive a new TEAM card(s). Failure to respond may result in your TEAM card(s) expiring and a renewal will not be issued.

To ensure receipt of communications from the Department, be sure to notify us if your mailing address or other contact information changes. The quickest way to notify us is by visiting **[floridarevenue.com/taxes/updateaccount](http://floridarevenue.com/taxes/updateaccount)**.

To notify us in writing, mail to:  
Account Management – MS 1-5730  
Florida Department of Revenue  
PO Box 6480  
Tallahassee FL 32314-6480

If you have any questions about the status of your application, call Taxpayer Services at 850-488-6800.

If you need to replace a lost or stolen card, or want to know if your TEAM card has been mailed, you can email DACS at **[FarmTEAMCard@fdacs.gov](mailto:FarmTEAMCard@fdacs.gov)**.

Forms are available at **[floridarevenue.com/forms](http://floridarevenue.com/forms)**.

**To speak with a Department of Revenue representative**, call Taxpayer Services at 850-488-6800, Monday through Friday, excluding holidays.