



CITY OF ROSWELL
 COMMUNITY DEVELOPMENT | BUSINESS REGISTRATION
 38 HILL STREET - SUITE G-30
 ROSWELL, GA 30075
 PHONE: (770) 594-6235 | WEB: WWW.ROSWELLGOV.COM

CHANGE OF INFORMATION FORM

This form is used if your business name, physical business location, mailing address or contact information has changed since your last application for an occupation tax certificate was registered with the City of Roswell. **If your physical business location has changed, Fire, Building and Zoning approvals are required as well as a Lease Agreement or Proof of Residency for the new location.**

Account Information:

Business License #: _____

Estimated Gross Receipt: _____ **Number of Employees:** _____

Date Requested: _____ Effective Date of Change: _____

Phone Number: _____ Email Address: _____

Name of Business: _____

Business Description: _____

Requestor Name/Title (Printed): _____ (Must be Licensee)

Does this business hold an alcohol license? YES () NO ()

Please note changes below:

Old Business Name: _____ New Business Name: _____

Old Location Address: _____ New Location Address: _____

Old Mailing Address: _____ New Mailing Address: _____

ACKNOWLEDGEMENT AND CONFIRMATION

I declare under penalty of making false declaration, that I am authorized to complete this form and to the best of my knowledge and belief, it is a true, correct and complete statement made in good faith.

 Signature Title Date

OFFICIAL USE ONLY

NAICS CODE: _____

Code Clearance Sent: _____

FEE CLASS: _____

Fire: ___ Building: ___ Zoning: ___

RATE: _____

PENDING ITEMS: _____