



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