



CITY OF NOVATO
 Business Licensing Division c/o HdL
 8839 N Cedar Ave #212, Fresno, California 93720
 PH (415) 899 – 8917
 Email: BL@novato.org

Business License No. _____

CHANGE OF ADDRESS /NAME FOR BUSINESS LICENSE

Name change to a “DBA” needs a copy of Fictitious name registration from the County of Marin. A change in ownership type/ Tax ID # implies a new entity and will require an application for a NEW business license.

BUSINESS DATA (All boxed items are public information)

Business Name _____	Phone (____) _____
New Business Address _____	City _____ Zip _____

Billing Address _____ (If different from above address)	City _____ Zip _____
Old Name and Address _____	City _____ Zip _____
Email Address: _____	

Type/Nature of Business/ Activity *(please specify the exact nature of the business and all the related activities of this business)* :

No. of owners and employees (contractor NA) _____
 Professional/Contractor License Number _____

Type of business space: Office Rental sales floor Warehouse Storage yard Residence (H.O.P. is required)

II. OWNERSHIP TYPE:

Proprietorship Partnership Corporation LLC
 Federal ID #, California Tax ID #, or Social Security # _____

(For more than one owner, attach additional sheets)

Owner’s Name _____	Phone (____) _____
Address _____ City _____ State _____ Zip _____	

III. FEE – Payable to CITY OF NOVATO

A BUSINESS LICENSE is issued as a receipt for payment of fees and does not automatically sanction establishment of a business within the community. New business applications, modification to or relocation of existing businesses must meet requirements of all applicable laws and regulations. Contact the appropriate controlling agency to assure this stipulation has been met. A sales or use tax may apply to your business activities.

IV. APPLICANT _____ Date _____
 Print Name _____ Title _____