

BUSINESS LICENSE CHANGE OF BUSINESS NAME

Date:				**FOR OFFICE	USE ONLY**	
Business Owner:				Business License#:		
				Amount Paid:		
NEW BUSINESS NAME						
(please print)				Date Paid:		
Business Name:						
Business Name:	(STREET)	-				
Mailing Address:						
	(STREET)		(CITY)	(STATE)	(ZIP)	
Phone:		Email:				
Nature of Business:						
PREVIOUS BUSINESS N	<u>IAME</u>					
Business Name:						
	(STREET)					
Mailing Address:						
	(STREET)		(CITY)	(STATE)	(ZIP)	
Phone:		Email:				

NOTE: Accompanying this form should be the registration paperwork from the Division of Corporations and Commercial Code. If that has not been completed then please contact them by calling them toll-free at (877) 526-3994 or online at https://secure.utah.gov/osbr-user/user/welcome.html. Once that has been done, both forms must delivered in person or scanned & emailed to businesslicense@tooelecity.gov. Once received and verified, the requested change of information will be done and a new license reflecting the name change will be mailed out.