



BUSINESS LICENSE AMENDMENT REQUEST

Treasurer-Tax Collector
44 N. San Joaquin Street, Suite 150
Stockton, CA 95202
Phone (209) 468-2133 • Fax: (209) 468-9482
www.sjcttc.org

Please complete the request form completely and accurately. Incomplete forms will be returned.

Please note: Business Licenses are non-transferrable. Changes to the physical location of a business requires a new business license. Changes to the type of business, service or product may require a new business license

1. Business License Control Number

2. Business License Number

3. Existing Business Name

4. Existing Business Owner(s)

6. Current Mailing Address

7. Amendments Requested (check all that apply)

Business Name

Ownership Change LLC, PTP

Other: _____

Business Mailing Address

8. Proposed Changes:

Proposed Business Name

Proposed Ownership Change

New Mailing Address

9. Change Requested By

10. Title

11. Phone Number

12. Signature: _____ Date: _____

Official Use Only

Amendment Approved by: _____ Date: _____

Business License Expiration: _____

Comments: _____