



**CHANGE OF ADDRESS OR OWNERSHIP STATUS**

**Current Business as listed on invoice**

Account ID: \_\_\_\_\_ Facility ID: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

**Changes to Business or Owner Address Information**

A. If Business is still operational under the same ownership, please provide any changes to owner's contact information:

a. Owners Name: \_\_\_\_\_

b. Owners Address: \_\_\_\_\_

c. Owners Phone – Work: \_\_\_\_\_ Mobile: \_\_\_\_\_

d. Owners Email (required): \_\_\_\_\_

B. If Business is still operational under the same ownership, please provide any changes to facility's phone number or email address:

a. Facility Phone: \_\_\_\_\_

b. Facility Email: \_\_\_\_\_

**Changes to Ownership Status**

A. Was the Business bought or sold in 2020? Yes No (circle one)

B. If "Yes", please provide the following information:

a. Previous Business Name: \_\_\_\_\_

b. Previous Business Address: \_\_\_\_\_

c. New Business Name: \_\_\_\_\_

i. Business/Facility Phone: \_\_\_\_\_

ii. Business/Facility Email: \_\_\_\_\_

d. Department of Revenue #: \_\_\_\_\_

e. New Owner Name: \_\_\_\_\_

f. New Owner Address: \_\_\_\_\_

g. New Owner Phone – Work: \_\_\_\_\_ Mobile: \_\_\_\_\_

h. New Owner Email (required): \_\_\_\_\_

**Please Note:** You will need to complete a Change of Ownership form depending on the type of business and we will need to inspect and approve your business to operate.