



DEPARTMENT OF FINANCE
 4228 FIRST AVENUE – SUITE 1
 TUCKER, GEORGIA 30084
 PHONE: (678) 497-9040 | WEB: www.tuckerga.gov

CHANGE OF ADDRESS FORM

This form is used if your business name, physical business location, mailing address or contact information has changed since your last application for a Business License was registered with the City of Tucker.

Per Sec. 16-38 of the City of Tucker Code of Ordinances, any person required to register with the finance department and who changes the place of operation shall notify the City of the new address in writing on a form provided by the City no later than the day of moving. *****If Ownership of Business or Business Location has changed, a new application MUST be submitted*****

Account Information:

Business License #: _____ Federal Tax ID Number: _____

Date Requested: _____ Effective Date of Change: _____

Phone Number: _____ Email Address: _____

Type of Business: _____

Requestor Name/Title: _____ **(Must be Licensee)**

Does this business hold an alcohol license? YES () NO ()

Please note changes below:

- Moved to another location within Tucker city limits **(Requires Approval from Zoning, Fire and Watershed Management from DeKalb County)**
- Moved outside Tucker city limits Business License will be closed **(Please Apply with New Jurisdiction)**

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

Zoning Approved: () Zoning Denied: ()

Approved By: _____ Date: _____