



DEPARTMENT OF FINANCE  
 4228 FIRST AVENUE – SUITE 1  
 TUCKER, GEORGIA 30084  
 PHONE: (678) 597-9040 | WEB: [www.tuckerga.gov](http://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: \_\_\_\_\_