



**BUSINESS LICENSE
CHANGE OF ADDRESS FORM**

Please complete for and return to City by mail or in person to:

City of Chattahoochee Hills
6505 Rico Road, Suite A
Palmetto, Ga 30268

OWNER/ LICENSEE:

Name: _____
(Applicant's name of Current Business License)

Mailing Address: _____

Phone: _____ Date of Birth: ____ / ____ / _____

Cell: _____ Email: _____

BUSINESS INFORMATION:

Name: _____
(DBA if applicable)

Previous Business Address:

Street Suite City/State/Zip

New Business Address:

Street Suite City/State/Zip

Previous Use of New Location: _____

Applicant's Signature

Date