



Doug Belden, Tax Collector

### Change of Address Form

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

Name of Owner(s): \_\_\_\_\_

Certificate Number: \_\_\_\_\_

Physical Address: \_\_\_\_\_

\_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(if different than above )

\_\_\_\_\_

Business Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner:

\_\_\_\_\_  
Date:

A certificate holder shall **pay a \$6.25 fee** and notify the Agency in writing no later than ten (10) days after changing its physical address from which the business will be operated or mailing address at which notice of any information pertinent to the business shall be considered received and binding upon the certificate holder.