



Change of Business Address Notification

Page 1 of 1

Updated **SEPT 2023**

NOTICE TO APPLICANT

Applicants must provide a copy of a signed lease or proof of ownership in addition to a copy of a current State Identification/Driver's License. Completed applications shall be mailed to the City of Pooler, Attn: Finance Dept/Business Registration, 100 SW Highway 80, Pooler, GA 31322 or emailed to finance@pooler-ga.gov.

OFFICE USE ONLY

Business Registration Staff Initials: _____ Date: _____ Issued: _____
PIN: _____ Zoning: _____ Acceptable Use: Y N N/A
Zoning Staff Name: _____ Signature: _____ Date: _____
Building/Life Safety CO Inspection Complete: Y N N/A Inspection Complete: Y N N/A
Building/LS Name: _____ Signature: _____ Date: _____

Business Information

License Number Date

Business Name/DBA Business Phone

Previous Address

Owner/Manager Name Owner/Manager Email

New Location Address

Mailing Address (if different from above) Relocation Effective Date

In accordance with the Chapter 26 of the Code of Ordinances of the City of Pooler, Georgia, I the undersigned certify that I am the person duly authorized to make this application for the change of address of this occupational tax certificate, alcohol license or other permit in the City of Pooler. By signature below, I affirm that the information provided is true, correct, and complete. *include copy of current State Identification/Driver's License.

Applicant Name Applicant Signature Date