

Office of  
Jenine Windeshausen  
Treasurer-Tax Collector  
County of Placer



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**BUSINESS NAME CHANGE and/or OWNER(S) ADDITION & DELETION FORM**

Business Name: \_\_\_\_\_  
(as it appears on current license)

License# \_\_\_\_\_

Situs Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone# \_\_\_\_\_

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**NAME CHANGE:** In order to comply with your request to modify the name of the existing business, please PRINT CLEARLY the information requested and sign below.

New Business Name: \_\_\_\_\_

Full Situs Address: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_

Signature: \_\_\_\_\_

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

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**OWNER(S) ADDITION &/or DELETION:** In order to comply with your request for the addition/deletion of owner name(s), (excluding **change of ownership**), please PRINT CLEARLY the information requested and sign below. Note: No additions or deletions will be made without the prior written consent of ALL affected parties. You may use the back of this form if more space is needed.

Owner Name: \_\_\_\_\_  
Check one -  ADD/  DELETE OR  NO CHANGE

Owner Name: \_\_\_\_\_  
Check one -  ADD/  DELETE OR  NO CHANGE

**I/We declare under penalty of perjury, the above is true and correct.**

**SIGNATURE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

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**Please check at least one box:**

NAME CHANGE &/OR ADDITIONS/OR DELETIONS .....26.00

COPY OF LICENSE SHOWING ABOVE CHANGES ..... 27.00

**TOTAL FEES DUE:**.....

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2976 Richardson Drive • Auburn, California 95603

Tax Collector (530) 889-4120 • Business Licenses (530) 889-4120 • Treasurer (530) 889-4140 • Bonds (530) 889-4144