



City of Palm Springs

Business License Tax Division

3200 E. Tahquitz Canyon Way • Palm Springs, California • 92262

Tel: (760) 323-8289 • Fax: (760) 322-8344 • Web: www.palmspringsca.gov

CHANGE OF ADDRESS

NOTE: BEFORE A LICENSE CAN BE ISSUED -

CLEARANCE FROM THE CITY'S PLANNING/ZONING, BUILDING, AND FIRE DEPARTMENTS MUST BE OBTAINED

BUSINESS NAME _____

BUSINESS OWNER NAME _____

OLD BUSINESS ADDRESS _____

NEW BUSINESS ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____ **PHONE** _____

MAILING ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____ **EMAIL** _____

SECONDARY CONTACT _____ **PHONE** _____

BUSINESS LICENSE FEE \$ _____

RENEWAL FEE \$ _____

BUILDING INSPECTION \$ _____ 113.00

FIRE & SAFETY FEE* \$ _____ 184.00

HOME OCCUPATION FEE \$ _____

STATE DISABILITY FEE \$ _____

TOTAL AMOUNT DUE \$ _____

**PLEASE RETURN THIS COMPLETED FORM
ALONG WITH YOUR CHECK PAYABLE TO:**

CITY OF PALM SPRINGS
BUSINESS LICENSE TAX DIVISION
P.O. BOX 2743
PALM SPRINGS, CA 92263-2743

* Please contact our Fire Prevention Bureau Inspection Request Line at (760) 778-8419 to schedule an inspection when you are ready to open for business.

FOR MORE INFORMATION OR HELP WITH THIS FORM CALL (760) 323-8289

BUSINESS OWNER SIGNATURE _____ **DATE** _____

DEPARTMENT USE ONLY

PLANNING DEPARTMENT APPROVAL:

TYPE OF BUSINESS _____
GROUND LEVEL

OFFICE RETAIL HOME
SECOND LEVEL OR HIGHER

SIGNATURE: _____ **DATE** _____

FIRE DEPARTMENT APPROVAL:

SIGNATURE: _____ **DATE** _____

BUSINESS LICENSE TAX DIVISION:

PROCESS DATE _____

ACCOUNT NUMBER

RECEIPT NUMBER

ORIGINAL APPLICATION DATE

--	--	--