



### CHANGE OF ADDRESS FORM

Federal Employers ID Number \_\_\_\_\_

Social Security Number \_\_\_\_\_

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

Contact Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Contact Fax Number: \_\_\_\_\_

Contact Mobile Number: \_\_\_\_\_ Contact E-mail Address: \_\_\_\_\_

Physical Address of Business: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number at Physical Address: \_\_\_\_\_

Signature of Owner or Authorized Agent	Title	Date
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**Privacy Act Statement**

Disclosure of a Social Security Number (SSN) to the City of Charleston is voluntary. If you do not wish to disclose your SSN, you may provide an alternative identification number, The City of Charleston solicits this information pursuant to West Virginia Code § 8-13-13 and the Charleston City Code. The City of Charleston will not disclose your SSN or any other information you provide to any other entity or party. The City of Charleston requests this information to facilitate the verification of withholding and payment of service fees.

**\*\*\*IF THE PHYSICAL ADDRESS OF YOUR BUSINESS, WITHIN THE CITY LIMITS OF CHARLESTON, IS CHANGING THE SECTION BELOW NEEDS TO BE COMPLETED BY THE APPROPRIATE DEPARTMENT\*\*\***

Do Not Write Below This Line – For Planning Department Use Only – Do Not Write Below This Line

**ZONING-PLANNING DEPARTMENT Phone Number: (304)348-8105**

- 1. Was the business location previously occupied? \_\_\_Yes \_\_\_No
- 2. Is the proposed business a continuation of that previous type of business? \_\_\_Yes \_\_\_No
- 3. Has the applicant confirmed the zoning of this location? \_\_\_Yes \_\_\_No
- 4. Does this business conform to the current zoning code? \_\_\_Yes \_\_\_No
- 5. What is the Zoning District of this proposed business: \_\_\_\_\_
- 6. Applicable Section of the Zoning Ordinance: \_\_\_\_\_
- 7. Has the Planning Office approved the proposed business? \_\_\_Yes \_\_\_No  
If no, the reasons are as follows:

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_  
Planning Official

Do Not Write Below This Line – For Building Department Use Only – Do Not Write Below This Line

**Phone Number: (304)348-6833**

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_  
Building Official

Do Not Write Below This Line – For Fire Department Use Only – Do Not Write Below This Line

**Phone Number: (304)348-5058**

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_  
Fire Department Official