



NASSAU COUNTY
DEPARTMENT OF CONSUMER AFFAIRS
 240 Old Country Road, Mineola, NY 11501
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 consumeraffairs@nassaucountyny.gov
 www.nassaucountyny.gov

FOR OFFICE USE ONLY

Name Change at Renewal, No Additional Fee ___

Name Change Not At Renewal, \$110 ___

Date Paid: _____

LICENSE NAME CHANGE FORM

License No: _____

Prior/Old Name of Business: _____

Business Address: _____ Business Phone: _____

_____ Cell Phone: _____

Email Address: _____

NEW Name of Business:

New Name/Assumed Name of Business: _____

If you are changing the name of your business on a current Business Certificate filed with the Nassau County Clerk, you **MUST** provide an Amended Nassau County Business Certificate. If you have amended the business name for your corporation or LLC, or if you have added an Assumed Name to your corporation or LLC, you **MUST** provide an Amended or Assumed Name New York State Filing Receipt. If you are going from a Business Certificate to a corporation or LLC, you **MUST** provide a New York State Filing Receipt. See <https://www.nassaucountyny.gov/1565/Making-Changes-to-a-Current-License> for instructions. **If you formed a new corporation/LLC or Business Certificate, you must file a new application.**

New Business Phone: _____ New Email Address: _____

EACH INDIVIDUAL OWNER, OFFICER, PARTNER, MEMBER, PRINCIPAL ETC. MUST BE LISTED*

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

*ALL EMPLOYEES AND SALESPERSONS WHO HAVE AUTHORITY TO ESTIMATE, NEGOTIATE AND/OR FINALIZE CONTRACTUAL AGREEMENTS ARE REQUIRED TO SUBMIT DISCLOSURE FORMS, PHOTOS, IDENTIFICATION AND PROOF OF HOME ADDRESS, IF NOT PREVIOUSLY SUBMITTED.

INSURANCE and WORKERS COMPENSATION: All insurance forms must reflect any name changes and must have the description of work that you are licensed and insured to do.

MUST BE NOTARIZED

Sworn to before me
 this ____ day of _____, 20 ____

 (Applicant Printed Name)

 Notary's Signature

 (Applicant Signature)