



NASSAU COUNTY
DEPARTMENT OF CONSUMER AFFAIRS
 240 Old Country Road, Mineola, NY 11501
 Phone: (516) 571-2600
 consumeraffairs@nassaucountyny.gov
 www.nassaucountyny.gov

FOR OFFICE USE ONLY

Address Change at Renewal, No Additional Fee ___
 Address Change & Copy of License Not at Renewal, \$60 ___
 Date Paid: _____

**FORM TO CHANGE
 BUSINESS ADDRESS**

License No: _____

Name of Business: _____

Old Business Address: _____

Business Phone: _____

Cell Phone: _____

Email Address: _____

NEW BUSINESS ADDRESS:

New Business Address: _____ New Business Phone: _____

_____ New Cell Phone: _____

New Email Address: _____

New Mailing Address (If different than business, PO Box or UPS Store Only): _____

INSURANCE and WORKERS COMPENSATION: All insurance forms must reflect the new business address/ location and have the description of work that you are licensed and insured to do.

See <https://www.nassaucountyny.gov/1565/Making-Changes-to-a-Current-License>

MUST BE NOTARIZED

Sworn to before me

this _____ day of _____, 20____

 Notary's Signature

(Applicant Printed Name)

(Applicant Signature)