CITY OF RIVERSIDE
BUSINESS TAX CERTIFICATE
MODIFICATION FORM

Submit By E-mail

Print Form

Business Tax Account Number:

PLEASE SELECT THE FOLLOWING ITEMS TO BE CHANGED:

*There is no fee to submit a modification form. If requesting a replacement copy of the current certificate or a new certificate reflecting changes, a $14.00 fee will apply.

- ☐ Business Name
- ☐ Business Address
- ☐ Mailing Address
- ☐ Telephone / Fax # / E-mail address
- ☐ Closure of Business Tax Certificate
- ☐ Business Type
- ☐ Federal Tax ID/ Social Security #

FROM	TO
BUSINESS NAME:	BUSINESS NAME:
BUSINESS ADDRESS: Street Address: City: State: Zip Code:	BUSINESS ADDRESS: Street Address: City: State: Zip Code:
MAILING ADDRESS: Street Address: City: State: Zip Code:	MAILING ADDRESS: Street Address: City: State: Zip Code:
CONTACT INFORMATION: Telephone #: Fax #: E-Mail:	CONTACT INFORMATION: Telephone #: Fax #: E-Mail:
BUSINESS TYPE:	BUSINESS TYPE:
Federal Tax ID #:	Federal Tax ID #:
Social Security #:	Social Security #:

Closure of Business Tax Certificate (please provide explanation, i.e. business has closed, business is no longer doing work in the City of Riverside, etc.):

Please note: If your company has a change in ownership, a new business tax certificate may need to be filed. Please contact the Business Tax office at (951) 826-5465 for further instructions.

Signature: Phone: Date: