



CHATHAM COUNTY
DEPARTMENT OF BUILDING SAFETY &
REGULATORY SERVICES
1117 Eisenhower Drive, Suite-D
Savannah, Georgia 31406
Phone 912.2014302 – Fax 912.201.4301

OCCUPTIONAL TAX DIVISION
CHANGE OF BUSINESS OWNERSHIP AFFIDAVIT

STATE OF GEORGIA }
 }
COUNTY OF CHATHAM }

On this ____ day of _____, 20____, first being duly sworn, I,

_____, agree with this affidavit, relating to the business of:
(Print Owner/Registered Agent Name)

(Business Name)

Business Address: _____ City _____ State _____ Zip _____

Current Business License #: _____

I no longer affiliated with, and hereby relinquish all rights and responsibilities to the above named business.

SURRENDER CURRENT BUSINESS TAX LICENSE/CERTIFICATE AND SUBMIT A COPY OF CURRENT STATE ISSUED IDENTIFICATION.

Signature

NOTARY PUBLIC:

Subscribed to and sworn before me this ____ day of _____, 20____.

Signature

My Commission Expires: _____

SEAL