

Business Tax Statement of Information

1. Business Description

Business Tax Account #:	Business Name:
Business Phone #:	Business Address:
Owner Phone # (if different):	Owner Mailing Address (if different):

2. Statements

The statements and information provided below are in relation to the business described above:

☐	Business Closure: This business has been closed as of the following date:	Business Closure Date:
	Reason for Closure (optional):	
☐	No Association: The undersigned is not, nor has been, the owner, manager, or operator of this property, or any Business at this location.	
☐	No Business at this location Non-Commercial Zoning Only*: The undersigned owns or rents this property, but no business has been in operation at this location during the period of ownership/rental. <i>*Rental of Commercial zoned property requires a business tax certificate.</i>	
☐	Other (Please Specify directly below):	
	Please provide statement:	

3. Declarations

The signature below signifies agreement with the following statements:

- I understand that prior to starting or continuing operation of a business at this location, I must notify the City of Visalia (COV) and comply with all requirements of the COV Municipal Code, including application for any required permits, certifications, and registrations.
- I understand that operating a business at this location without the proper permits, certifications, and registrations will result in fines and penalties in addition to the proper fees which will be payable to the City of Visalia.
- I declare, under penalty of perjury, that the information provided on this form is true and correct.

Owner Signature:	Date Signed:
------------------	--------------

4. Form submittal to City of Visalia Finance Department



By Mail: PO Box 4002 Visalia Ca 93278-4002
In Person at: 707 W Acequia Ave Visalia Ca 93291
By Email to: businesstax@visalia.gov