

**BUSINESS LICENSE STATUS CHANGE, CITY OF SUNNYVALE**

Please See Instructions on the Reverse Side



**PLEASE PROVIDE THE FOLLOWING INFORMATION FROM YOUR CURRENT BUSINESS LICENSE:**

1. **Business License Number** \_\_\_\_\_

2. **Name of Business** \_\_\_\_\_

3. **Business Address** \_\_\_\_\_  
 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

4. **Business Mailing Address** \_\_\_\_\_  
 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**PLEASE CHECK THE APPLICABLE BOX(ES) AND PROVIDE YOUR NEW INFORMATION:**

**Business Name Change**  
 New Business Name \_\_\_\_\_

**Business Mailing Address Change**  
 New Business \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Business Address Change**  
 New Business Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Sunnyvale Home Occupations, please complete questions a-g.**

a. Will customers be visiting your home?  Yes  No

b. Will there be any deliveries?  Yes  No

c. How many people will be working in your home? \_\_\_\_\_

d. Total floor area (square feet) of your home. \_\_\_\_\_

e. Total floor area (square feet) of your home that will be devoted to business. \_\_\_\_\_

f. How many vehicles (associated with your business) will visit your home each day? \_\_\_\_\_

g. Where in your home will you be operating your business? \_\_\_\_\_

**Other (please explain clearly)**  
 \_\_\_\_\_  
 \_\_\_\_\_

**Inactivate the Business License** Reason for inactivation: \_\_\_\_\_

Check box if you would like a refund of any excess tax paid (if applicable).  
 If you are requesting a refund, please update your mailing address to indicate where your refund should be sent.

**Duplicate copy of the Business License**  Yes  No (\$10.00 fee)

• Note: When you have filled out this form, signed it, and paid the correct tax, you will be given a receipt. The receipt is not a business license. Payment of a business license tax and issuance of a Business License do not entitle you to conduct any illegal business or operations, or violate any applicable federal, state or local laws or regulations. As the owner or operator of a business, you must comply with all applicable zoning and public safety regulations and obtain all required permits.

• Home Businesses (if applicable): I have read and understand the requirements for home businesses (see reverse side) and shall operate my home business in compliance with these requirements as well as all other applicable provisions of the Sunnyvale Municipal Code.

• I certify that I have read and understand the above, and I declare under penalty of perjury that the information given above is true and correct to the best of my knowledge.

**Signature** \_\_\_\_\_ **Title** \_\_\_\_\_ **Date** \_\_\_\_\_

**CITY USE ONLY** Fees: Zoning Review \$7.50; Duplicate Certificate \$10.00 Total \$ \_\_\_\_\_

Fixed  Non-Fixed Cashier \_\_\_\_\_ Check No. \_\_\_\_\_ Receipt No. \_\_\_\_\_

Zoning District \_\_\_\_\_ Planning Review \_\_\_\_\_ Date \_\_\_\_\_

## INSTRUCTIONS FOR COMPLETING THE BUSINESS LICENSE CHANGE OF STATUS

If you have any questions, please call the Treasury Division at (408) 730-7620

To change or inactivate a current City of Sunnyvale Business License, please complete this form and submit to: City of Sunnyvale, One-Stop Permit Center, 456 West Olive Avenue, P.O. Box 3707, Sunnyvale, CA 90488-3707. Hours: 8:00 a.m.-12:00 noon and 1:00 p.m.-5:00 p.m., Monday through Friday.

- 1. Business License Number** – This number appears on your Business License.
- 2. Name of Business** – The name of the business as it appears on your current Business License.
- 3. Business Address** – The address of your business as it appears on your current Business License.
- 4. Business Mailing Address** – The mailing address as it appears on your current Business License.

### Status Change Information:

**Business Name Change** – If you are changing the name of your business, write the new name in the space provided.

**Business Mailing Address Change** - If you are changing the mailing address of your business, write the new mailing address in the space provided.

**Business Address Change** - If you are changing the location of your business, write the new address in the space provided. There is a Zoning Review Fee of \$7.50 if the business moves to a new location within Sunnyvale.

**Sunnyvale Home Business** – If you are operating your business out of your Sunnyvale home and you are moving to a new home in Sunnyvale, please complete the Home Business Questions.

- The business shall be conducted within the dwelling unit and not in the yard, garage or an accessory structure.
- Non-residential external or internal alterations are not allowed.
- No more than 20% of the floor area or 400 square feet, whichever is less, shall be devoted to the business. This includes storage of inventory or products (which is limited to 50 cubic feet).
- No persons other than the residents shall work or report to work on the premises.
- No display window or signage is permitted.
- If the residential address is used in an advertisement, the words “by appointment only” shall be included in the advertisement.
- No sale of merchandise shall occur on the premises.
- The home business shall not cause more than three vehicles (including vehicles used by customers, vendors, or delivery services) to visit your home per day. These vehicles shall not interfere with traffic circulation.
- No external noise, odor, glare, vibration, or electrical interference detectable to neighbors is permitted.
- No explosive, toxic, combustible, or flammable materials in quantities greater than allowed in residences shall be used or stored on the premises.
- The use or storage of supplies, electrical or mechanical equipment is limited to that which is compatible residential use.
- The number of home occupations at one address is not limited except the cumulative impact shall not exceed these regulations.

**Other** – Clearly state the change of status you are requesting in the space provided.

**Inactivating the Business License** – Please check the box if you would like to inactivate your license, and provide us with the reason for inactivating the license. If you believe you are eligible for a refund, please check the appropriate box. The original business license tax certificate must be included with this form for the license to be inactivated.

**Duplicate copy of the Business License** – If you would like a new updated Business License, check the yes box. If not, check the no box.