



BUSINESS DIVISION

NOTIFICATION TO THE ASSESSOR OF BUSINESS IN SAN BERNARDINO COUNTY:

Location of Business:

Street Address	Unit or Suite Number
City	Zip Code
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Start date at this location	Phone Number

Mailing Address:

Street Address	Unit or Suite Number	
City	State	Zip Code

Business Type:

☐ Retail ☐ Wholesale ☐ Manufacturer ☐ Service-Professional

Ownership Type:

☐ Proprietorship ☐ Partnership ☐ Corporation ☐ Other

Full Legal Name:

Last, First, Initial or Corporation Name

Partner or Co-Owner:

Last, First, Initial or Corporation Name

Doing Business As (DBA):

Name in which you are doing business as

Signature of Owner, Partner, or Officer

Date