

City of Sioux Falls Building Services License Change Authorization Form

Company Name (previous name if changing): _____ Date: _____

Address (previous address if changing): _____

Change of Phone Number:
Please change our business phone numbers to: _____

Change of Business Address:
Please change our physical address to: _____

Please change our mailing address to: _____

Change of Business Name:
Please change our company name to: _____
(Print clearly the name as it is to appear on license)

Change of Owners' Names (Partnerships):
Please add/remove (Name): _____
as owner/partner of (Business Name): _____
I/we understand that I/we are responsible for making the necessary changes to our bond and general liability insurance policy. All partners listed on license must sign this authorization form.

Change of License Holder Name:
Designated Construction Supervisor or Master to _____
(must currently hold a license with the City, or have tested within 90 days) Please print name clearly

Change of Excise Tax Number: _____

Change of Email Address: _____

Signatures

I/we authorize you to make the above change(s) to our license information.

Please print name clearly	Signature	Date
Please print name clearly	Signature	Date

Please sign, date, and return to: Building Services, Attention: Tonya, 224 West Ninth Street, P.O. Box 7402, Sioux Falls, SD 57117-7402 or fax to 605-367-8737, or email to thovaldt@siouxfalls.org.
Call 605-367-8672 if you have any questions.

Application Instructions for License Change Authorization Form

General:

Applications cannot be processed until all documents have been submitted. Application processing takes approximately two weeks.

Change of Phone Number:

We prefer to have a business number, as well as a mobile number, if possible.

Change of Business Address:

We require both a physical and mailing address for your license.

Change of Business Name:

In order to change the business name listed on your license, you must submit either a bond rider showing the current bond on file has been changed, or submit a new original bond with the new business listed. An updated certificate of liability insurance is also required showing the new business name, if the liability insurance is a requirement of your license. Also, if there are any open permits pulled under the previous license name, a written letter signed by the license holder must be submitted with those addresses and permit numbers listed, stating that the new business name will be responsible for any and all permits pulled under the previous business name. (See form to follow.)

Change of Owners' Names:

Owners' or partners' names can be changed. Signatures would be required from both the previous owner and the new owner. Please be sure to specify what changes are being made.

Change of License Holder Name:

Changing of the Designated Construction Supervisor or Master is possible (this person could also be known as the "license holder"). This person must hold a current license with the City or has passed the appropriate examination within the last 90 days.

Change of Excise Tax Number:

This license is issued by the State of South Dakota. They can be reached at 300 South Sycamore Avenue, Suite 102, at (605) 367-5800, or at www.state.sd.us/drr2/businessstax/st/salestax.htm

Change of Email Address:

We would use your email address to notify you of upcoming bond or insurance expiration, upcoming holidays that the City will be closed, or continuing education or code update seminars that are available. This information would be used by the department only.

License Application:

The form must be fully completed where applicable, signed, and dated by the applicant.

Fees:

There are no fees to change an active license. Fees may be required if license renewal is required.

Mail To:

Building Services, Attention: Licensing, 224 West Ninth Street, P.O. Box 7402, Sioux Falls, SD 57117-7402, Phone: 605-367-8672, Fax: 605-367-8737, Email: thovaldt@siouxfalls.org, Website: www.siouxfalls.org/Building.

