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City of Phoenix

SEXUALLY ORIENTED BUSINESS LICENSE INFORMATION UPDATE FORM

ACCOUNT # _____

Business Name	("dba"):
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Please Check All Applicable Update Items.		
For Individuals:	For the Business:	
Change in Legal Name	Change in Business Name	
Change in Residential Address	Change in Mailing Address for City Notices	
Change in Phone Number	Change in Phone Number	
Other (Specify)	Other (Specify)	
In the space below, please describe any changes to the information currently on file with the City Clerk Department. All other information currently on file will be presumed to be complete and accurate.		
(Additional info on back)		
I swear under penalty of perjury that I have read the foregoing information update and that all of the information and statements made herein are true and correct.		
Authorized Signature Prin	nted Name Date	
Authorized Signature Fill		