



City of Helena

# CITY OF HELENA

Business Licensing Division  
316 N Park Avenue, Room 150  
Helena, Montana 59623

Phone: (406) 447-8450 Fax: (406) 447-8377

Email: citywater@helenamt.gov

## BUSINESS LICENSE INFORMATION CHANGES

There is no fee for change of address, ownership or business name.

PLEASE CHOOSE ALL APPLICABLE CHOICES

- Change of Address
- Change of Ownership
- Name Change

Current License Number: \_\_\_\_\_

Former Business Name: \_\_\_\_\_  
(For Name Change only)

PLEASE PRINT CLEARLY:

Business Name: \_\_\_\_\_

Location Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Other Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

- Co-Owner
- Manager
- Applicant
- Other

Email: \_\_\_\_\_

Business Activity: \_\_\_\_\_

PLEASE BE AS SPECIFIC AS POSSIBLE

No. of Full Time Employees: \_\_\_\_\_

I hereby certify that this business being licensed is not a trade, occupation, pursuit, profession or entertainment prohibited by any law of the United States or this state, or by any provision of this code, including the sale of medical marijuana.



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Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_