Receipt # _____

Business Registration Update Form

City of Rio Rancho - Office of the City Clerk
3200 Civic Center Circle NE, Suite 150, Rio Rancho, NM 87144
Phone: (505) 994-5004 • Fax: (505) 994 2557 • Email: clerk@rrnm.gov

Please fill out all the information on this form by typing, or using blue or black ink. Return update form to the City Clerk's Office in person, by email, fax or mail. Please contact us at (505) 891-5004 with any questions.

The purpose of this form is to update your business registration information on file with the City Clerk's Office. If you are moving to a new commercial location, a fire inspection, zoning verification, and building inspection are REQUIRED for the new location. If your CRS # or ownership information has changed, you **MUST** complete a new Application for Business Registration form, not this form.

Type of Business: ☐ Commercial ☐ Home Occupation ☐ Non-Profit ☐ Out of City

City issued Business Registration #: ☐☐ – ☐☐☐☐☐☐☐☐

BTIN #/Tax ID #: ☐ ☐ – ☐ ☐ ☐ ☐ ☐ ☐ – ☐ ☐ ☐

Nature of Business: _____
REQUIRED

SECTION 1 - **OLD** Business Information

Old Business Name: _____

DBA: _____

Old Physical Address: _____

Old Mailing Address: _____

SECTION 2 - **NEW** Business Information

New Business Name: _____

DBA: _____

New Physical Address: _____

Commercial Locations ONLY, Provide sq. ft. of NEW location: _____

New Mailing Address: _____

Phone #: _____ Email: _____
REQUIRED REQUIRED

SECTION 3 - Owner/Co-Owner/CEO/President/Position Held

This section is for adding personnel not listed on original application. If removing or adding personnel from original list please do so by submitting a separate letter.

#1: _____ _____
First & Last Name Title/Position Held

Home Address: _____
City/State Zip

#2: _____ _____
First & Last Name Title/Position Held

Home Address: _____
City/State Zip

SECTION 4 - State or Federal Licensing Information

If your business requires one of the following Licenses/Permits and/or liablility insurance, you MUST submit a copy with your application.

- NM Environment Department Food Permit
- Federal Environmental Protection Agency Permit(s)
- NM Contractor's License
- NM Medical/Pharmaceutical License(s)
- NM Cosmetology/ Barbers License
- NM Liquor License
- NM Real Estate/Broker License
- Well Drillers
- NM Veterinary Medicine
- Federal Firearms License
- Any other License(s)

_____ License #

_____ Expiration Date

☐ Copy Provided

Copy of Liability Insurance ☐ Provided ☐ Not Applicable

SECTION 5 - Signature of Applicant

By signing this form, I attest that the information I have provided herein is true and accurate to the best of my knowledge. I certify that I am authorized to sign the same as an agent on behalf of the above stated business. I agree to pay all associated fees including: the annual business registration fee, fire inspection fees, and other permit fees as required by the City of Rio Rancho. I understand that I must file any changes to my business status, operations, and/or contact information with the City Clerk's office in a timely manner.

Printed Name: _____ Date: _____

Signature: _____ Owner, Partner, or Corporate Officer

_____ Title/Position Held

FOR OFFICE USE ONLY:

Zoning: ☐ **Approved** ☐ **Not Approved**

_____ Zoning Specialist Signature

_____ Date of Approval

_____ Current Zoning

Tracking # Issued: _____ Tracking # used for scheduling building inspection.

Fire Inspection: ☐ **Approved** ☐ **Not Approved** ☐ Non- Hazardous ☐ Hazardous

_____ Rio Rancho Fire Marshal or Designee Signature

_____ Date of Approval/Inspection

Building Inspection: ☐ **Approved** ☐ **Not Approved**

_____ Building Inspector or Designee Signature

_____ Date of Approval/Inspection