



# City of Victorville

## Development Department

Planning ♦ Building ♦ Code Enforcement ♦ Business License

### Guidelines for Business License / Certificate of Occupancy Modifications

14343 Civic Drive  
PO Box 5001  
Victorville, CA 92392

(760) 955-5072  
Fax (760) 269-0046  
businesslicense@  
victorvilleca.gov

These guidelines are intended to accommodate specific changes to a Business License and / or Certificate of Occupancy without the requirement of new licensing approvals and Building Division site reviews.

**BSL = Business License**

**OCC = Certificate of Occupancy**

#### **Modifications Allowed for:**

- **Business Name Changes:** *A change in the business name, where the business ownership entity or classification has not changed.*
- **Partnership Business Personnel Listing Adjustments:** *A change in the list of personnel within a partnership where at least one person who was originally listed will remain on the license.*
- **Personnel / Vehicles Change:** *Adding or removing personnel / vehicles to include, but not limited to technicians, drivers, vehicles, etc., outside of the annual renewal process.*

#### **Business License & Certificate of Occupancy Modifications will NOT be allowed if:**

- **Change in Physical Location:** Licenses are required for each location (VMC 16-7.01.100) and are non-transferrable (VMC 16-7.04.040).
- **Full Change in Ownership:** *A complete change of ownership, where the ownership entity has changed.*
- **Change in Business Classification Type or Activity:** *A new BSL and OCC is required. (i.e. changed from a retail clothing store to an appliance repair service, etc). (VMC16-7.01.090 & VMC 16-7.06.010)*
- **Change in Land Use / Occupying Space:** *The land use has expanded or the business is occupying more space than originally approved for. A new OCC is needed, however, a new BSL may not be required; however, please check with our office, as a BSL modification may be needed.*
- **Ownership Type Modification (Sole Proprietor, Partnership, LLC, Corporation or Trust).**
- **Change in Internal / External Building:** *The building has been altered or modified either internally or externally. A new OCC is needed; however, a new BSL may not be required; however, please check with our office, as a BSL modification may be needed.*
- **Change in Floor Space:** *The floor space and/ or layout originally approved for the business listed in the C of O has changed. A new OCC is needed; however, a new BSL may not be required; however, please check with our office, as a BSL modification may be needed.*

**Additional Documentation:** Supplemental updated documents maybe required (matching the requested changes) along with the attached modification application. These forms may include, but are not limited to: seller's permit, articles of incorporation, fictitious business name, health permit, state license, etc.

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Updated 5/3/22



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### Application For Business License / Certificate of Occupancy Modification

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CURRENT ORGANIZATION / BUSINESS NAME: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_ BSL #: \_\_\_\_\_

~~~~~  
**PLEASE SELECT THE LICENSE MODIFICATIONS REQUESTED FROM THE FOLLOWING:**

**Business Name Modification:** *A change in the business name, where the ownership entity, business type, or classification has not changed.*

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

**Partnership Business Personnel Listing Adjustments:** *A change in the list of personnel within a partnership where at least one person who was originally listed will remain on the license.*

Add/ Remove: (name) \_\_\_\_\_

Add/ Remove: (name) \_\_\_\_\_

Add/ Remove: (name) \_\_\_\_\_

Add/ Remove: (name) \_\_\_\_\_

**Please Complete the Backside of this Application:**

- **Personnel / Vehicles Change:** *Adding or removing personnel / vehicles to include, but not limited to technicians, drivers, vehicles, etc., outside of the annual renewal process.*

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**PLEASE ANSWER THE FOLLOWING QUESTIONS:**

Y / N Have you made any alterations, modifications, or improvements to any part of the building?  
If yes, please explain: \_\_\_\_\_

Y / N Have you expanded your business into either an additional suite, unit, or different location?  
If yes, what suite or location? \_\_\_\_\_

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**I HEREBY CERTIFY UNDER PENALTY OF PERJURY that the above information is true and correct to the best of my knowledge and belief and do hereby apply for a MAJOR business license and certificate of occupancy modification.** *The business owner shall be required to submit a new business license and certificate of occupancy application if information is found after the approved license and permit modifications support the need for a new business license or certificate of occupancy. The business owner shall be liable for the costs associated with the business license and certificate of occupancy fees.*

SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

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**For Office Review:**

Y / N Is the business operating under an interim use, temporary use or conditional use permit?  
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# City of Victorville

## Development Department

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### Application for Adding Personnel/Vehicles

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PO Box 5001  
Victorville, CA 92392

(760) 955-5072

Fax (760) 269-0046

[Businesslicense@victorvilleca.gov](mailto:Businesslicense@victorvilleca.gov)

CURRENT ORGANIZATION / BUSINESS NAME: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_ BSL #: \_\_\_\_\_

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**PLEASE SELECT THE LICENSE MODIFICATIONS REQUESTED FROM THE FOLLOWING:**

**New Personnel**

Name: \_\_\_\_\_ CDL: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ CDL: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ CDL: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ CDL: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ CDL: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ CDL: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ CDL: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

**Remove Personnel**

Name: \_\_\_\_\_ CDL: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ CDL: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ CDL: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ CDL: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone: \_\_\_\_\_

**Vehicles (if applicable)**

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License# \_\_\_\_\_ VIN \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License# \_\_\_\_\_ VIN \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License# \_\_\_\_\_ VIN \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License# \_\_\_\_\_ VIN \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License# \_\_\_\_\_ VIN \_\_\_\_\_

~~~~~  
**I HEREBY CERTIFY UNDER PENALTY OF PERJURY that the above information is true and correct to the best of my knowledge and belief, and do hereby apply for adding personnel and/or vehicles.** *The business owner shall be required to submit a new business license and certificate of occupancy application if information is found after the approved license and permit modifications support the need for a new business license or certificate of occupancy. The business owner shall be liable for the costs associated with the business license and certificate of occupancy fees.*

SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

**For Office Review:**

Y / N Is the business operating under an interim use, temporary use or conditional use permit?

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