



MODIFICATION REQUEST FORM

INSTRUCTIONS: Please complete and check the information below to identify the changes made to your business. Failure to identify any changes in your business may result in denial of your request. The form must be signed by an owner, officer or authorized agent of the applicant company and properly notarized. Additional documents may be requested.

To protect your privacy, please redact ("black out") any sensitive information from your documents before submitting them for SBE certification. Use redaction tools in your document editor or cover sensitive details with a solid color. Ensure accuracy and save the redacted versions separately.

NOTE: The OSBD staff has up to 90 business days to complete this modification request. If Modification is for an upcoming bid, you may request an expedited process, for a fee of \$300.00. Please contact your Small Business Development Specialist if you have additional questions.

Palm Beach County Vendor ID No.: _____

Name of business currently on file with OSBD: _____

Check if change in business name (with fictitious name if applicable)

New Business Name: _____

Check if new address

New Business Address: _____

City: _____ State: _____ Zip Code: _____

ADD SERVICE CODES:

NIGP Codes: _____

CHANGE BUSINESS CATEGORY:

Construction CCNA Professional Goods

Other Services Professional (Non-CCNA)

Note: Supporting invoices, contracts, and/or proposals should accompany newly added service codes.

DELETE SERVICE CODES:

NIGP Codes _____

CHANGE OF BUSINESS STRUCTURE:

Sole Proprietor Corporation Partnership

Limited Liability Company (LLC)

Change of Federal I.D. No. _____

CHANGE OF QUALIFIER(S):

Name	License No.	Check Action	
		Add	Remove

