



DEVELOPMENT SERVICES

DBA Name Change Application

To apply online please visit our online portal

Name of Business: _____

Address of Business: _____ Bldg. # _____ Suite # _____

Owner of Business: _____

Applicant Name: _____ Phone Number: _____

E-mail Address: _____

Description of Business (be specific): _____

Fee & Inspection Information

Y N	Will your establishment include any of the following uses? Warehouses, Manufacturing Facilities, Retail Stores including rack display of products, Repair & Maintenance Shops, Laboratories, Hospitals.	If yes, a fire review and inspection will be required and the fee for this application will be \$212+Processing Charge.
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Property Information

Y N	Are there any Open Permits at the location? Any "Open" permit will require closure.
Y N	Is there an existing Fire Sprinkler System?
Y N	Is there an existing Fire Alarm System?

Special Requirements for Businesses with the Following Uses

Y N	Will there be any gaming devices?	If yes, Gaming Devices Affidavit is required.
Y N	Will alcohol be sold?	If yes, applicant must contact TABC regarding all State Requirements. City Document, IB168, may be required as part of the TABC application. DSD does not require TABC documents prior to updating the existing Certificate of Occupancy. Also, Affidavit in Support of Certificate of Occupancy and zoning approval is required.
Y N	Sexually Oriented Business?	If yes, Affidavit in Support of Certificate of Occupancy and zoning approval is required.

Y N	Headshop?	If yes, Affidavit in Support of Certificate of Occupancy and zoning approval is required.
Y N	Transitional Home? (Halfway House)	
Y N	Is this a Bed and Breakfast?	
Special Requirements for Businesses with the Following Uses		
Y N	Automotive Repair/Maintenance, Body Shop or Tire Shop?	If yes, Affidavit in Support of Certificate Of Occupancy and zoning approval is required.
Y N	<p>Will your establishment include any of the following uses?</p> <p>Restaurant, Fast Food, Grocery Store, Bar, Liquor store, Bingo Parlor, Bowling Alley, Convenience Store, Child Care Facility, School (public or private), Swimming Pool, Paint and Body Shop, Hotel or Motel, or any type of retail establishment that sells or serves food or drinks whether open, or pre-packed or pre-bottled.</p>	<p>If yes, a Food Establishment Permit will be required before business can operate. For questions call 210-207-0135</p> <p>Applicant Initials _____</p>

References: [IB 126 - Certificates of Occupancy](#)
[IB 168 - City of San Antonio's role in the Texas Alcoholic Beverage Commission Applications](#)

Application Fee: **\$50.00+Processing Charge**

The information included in this application is true and accurate.

Date: _____

Applicant Signature: _____

Printed Name of Applicant: _____

OFFICE USE ONLY

DSD Rep: _____

Located In: Accela Hansen

Previous COO Record or AP #: _____

Mainframe

Health Dept. Caveat (if applicable)

TABC Caveat (if applicable)