

Business Certificate for the Commonwealth of Massachusetts
Somerset

_____ 20__

In conformity with the provisions of Chapter 110, Section 5 of the General Laws, as amended, the undersigned hereby declare(s) that a business under the title of:

_____ is conducted at
_____ SOMERSET, MA 02726
(Business Address)

PHONE: _____ E-MAIL ADDRESS: _____

By the following named person(s).

FULL NAME (please print)

(Residence)

(Signature)

FULL NAME (please print)

(Residence)

(Signature)

FULL NAME (please print)

(Residence)

(Signature)

The Commonwealth of Massachusetts

_____ ss. _____, 20__

On this _____ day of _____, 20____, before me, the undersigned notary public, personally appeared _____
(name(s) of document signer(s)),
proved to me through satisfactory evidence of identification, which were:

to be the person whose name is signed on this document, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of (his OR her) knowledge and belief.

(Notary Signature)

(Notary-PLEASE PRINT NAME)

My commission expires: _____

(Seal)

A certificate issued in accordance with this section shall be in force and effect for four years from the date of issue and shall be renewed each four years thereafter so long as such business shall be conducted and shall lapse and be void unless so renewed.

Book _____ Page _____ Expiration Date _____

Issued by: _____
Town Clerk