



TOWN OF WELLESLEY
 525 Washington Street
 Wellesley, MA 02482

Book: _____

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Filing Date: _____

Expiration Date: _____

BUSINESS CERTIFICATE (D/B/A)

In conformity with the provisions of Chapter one hundred and ten, Section five of the General Laws, as amended, the undersigned hereby declare(s) that a business under the D/B/A name of:

is conducted at:

of the following business (if applicable):

by the following named persons:

OWNER NAME	RESIDENTIAL ADDRESS
1.	
2.	
3.	
1. _____	2. _____
SIGNATURE	SIGNATURE
3. _____	
SIGNATURE	

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.

Business description:

Business Phone:

Commonwealth of Massachusetts
 Norfolk ss.

On this _____ day of _____, 20____, before me, the undersigned notary public or Town Clerk Staff, personally appeared _____ who proved to me through satisfactory evidence of identification, which were _____, to be the person(s) whose name(s) is/are signed on the above document, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of (his) (her) knowledge and belief.

(Seal) _____

 (NOTARY PUBLIC/STAFF)

