

The Commonwealth of Massachusetts
Town of Westford
Business Certificate

Fee: \$30.00

Expiration date: _____

Date _____

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

Name of Business: _____ Phone #: _____
Please indicate if this business is incorporated

Nature of Business: _____ is conducted at

Location of Business: _____
(please indicate street address and mailing address if different)

by the following named persons.

<i>Full Name</i>	<i>Present Address</i>
_____	_____
_____	_____
_____	_____
_____	_____

Please sign in front of a Notary Public or a member of the Town Clerk's Office staff.

_____ <i>Signature</i>	_____ <i>Signature</i>
_____ <i>Signature</i>	_____ <i>Signature</i>

Commonwealth of Massachusetts

County Date _____

Personally appeared before me the above-named _____, proved his/her identification with satisfactory evidence, which were _____ and made oath that the foregoing statements are true. Signed and sealed.

Notary / Town Clerk's Office staff signature My Commission expires: _____
Date _____

County Date _____

Personally appeared before me the above-named _____, proved his/her identification with satisfactory evidence, which were _____ and made oath that the foregoing statements are true. Signed and sealed.

Notary / Town Clerk's Office staff signature My Commission expires: _____

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.

(Seal)

Town Clerk