



THE COMMONWEALTH OF MASSACHUSETTS

Town of Cohasset

BUSINESS CERTIFICATE (DBA)

\$50.00

Renewal \$20.00

_____, 20__

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

Business Name: _____ is conducted at

Business Address: _____ in the Town of Cohasset, MA

by the following named persons.

Owner Name(s) (Please Print)	Residence Address (Street, City, State and Zip Code)	Signature (Sign in Presence of Notary)
1.		
2.		
3.		

Description of Business: _____

Phone Number: _____

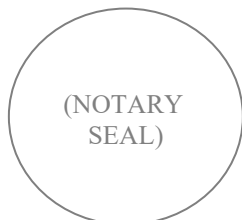
Email Address: _____

Employee Identification Number _____

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.

County of The State of _____ ss.

On this ____ day of _____, 20__, before me, the undersigned notary public, 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 preceding 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 Please Print Name)

(NOTARY Signature)

Commission Expires: _____

Town Clerk Use Only

Expiration Date: _____