



The Commonwealth of Massachusetts
Town of Kingston

Fee: \$40.00

Business Certificate

Certificate #:
Issue date:
Expiration 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:

Nature of Business:

Location of Business:

List mailing address, if different:

Owner Name(s) *	Owner Residence Address(es)*
1.	1.
2.	2.

Phone Number: _____ Email: _____

* If a corporation is the owner, provide the corporate name and address, plus the name and title of the signing officer.

Sign below, only in the presence of a Notary Public

1. Print Name Signature
2. Print Name Signature

State/Commonwealth of: Massachusetts Date: _____
_____, ss.

Personally appeared before me the above-named 1. _____
2. _____ and made oath that the foregoing statements are true. Signed and sealed.

Notary Public
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.



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Paul Gallagher, Kingston Town Clerk