THE COMMONWEALTH OF MASSACHUSETTS **Assessor: _____**
Town of Ashland **Development Office: _____**

BUSINESS CERTIFICATE (DBA)

Fee: $40.00

_____, 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 Ashland, MA
(NO P.O. BOX ALLOWED)

Corporation Name (if applicable):_____
by the following named persons.

Owners/Officers of Corp. Name (please print)	Residence Address (Street,City,State, Zip Code)	Signature (Sign in presence of Notary)
1.		
2.		
3.		

Description of Business: _____
Phone Number: _____
Email Address: _____

BUSINESS CERTIFICATES SHALL BE IN EFFECT FOR **FOUR YEARS** FROM THE DATE OF ISSUE AND SHALL BE RENEWED EACH FOUR YEARS THEREAFTER. **A STATEMENT UNDER OATH MUST BE FILED WITH THE TOWN CLERK UPON MOVING, DISCONTINUING, RETIRING OR WITHDRAWING FROM SUCH BUSINESS OR PARTNERSHIP.** VIOLATIONS ARE SUBJECT TO A FINE OF $25 FOR EACH MONTH DURING WHICH SUCH VIOLATION CONTINUES.

Personally appeared before me the above named_____
and made oath that the foregoing statement is true.

(SEAL) _____

_____
Town Clerk or Notary Public

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