

Fee: \$10.00

(checks made payable to Essex Town Clerk)



CERTIFICATE OF TRADE NAME

TO THE TOWN CLERK OF THE TOWN OF ESSEX:

(I AM/WE ARE) _____
CONDUCTING AND TRANSACTING BUSINESS IN THE TOWN OF ESSEX UNDER THE FULL NAME OF:

(PRINT BUSINESS NAME)

THE MAILING ADDRESS IS: _____ TELEPHONE #: _____

THE STREET ADDRESS IS: _____

NATURE OF THE BUSINESS: _____

THE FULL NAME OF EVERY PERSON CONDUCTING OR TRANSACTING SAID BUSINESS, AND THE POST OFFICE ADDRESS
OF EACH IS AS FOLLOWS: (PRINT NAMES & ADDRESSES)

NAME _____ ADDRESS _____

NAME _____ ADDRESS _____

NAME _____ ADDRESS _____

SIGNATURES OF PERSONS
NAMED ABOVE:

STATE OF CONNECTICUT }
COUNTY OF MIDDLESEX } SS. Essex

DATE: _____

PERSONALLY APPEARED _____

WHO SUBSCRIBED AND SWORE TO THE TRUTH OF THE FOLLOWING CERTIFICATE, BEFORE ME

TOWN CLERK – NOTARY PUBLIC – JUSTICE OF THE PEACE
COMMISSIONER OF THE SUPERIOR COURT

RECEIVED & FILED _____

INDEX # _____

TOWN CLERK