



# Business Certificate

IDENTIFICATION: \_\_\_\_\_  
APPROVED: \_\_\_\_\_  
EXPIRES: \_\_\_\_\_  
BUSINESS CERTIFICATE #: \_\_\_\_\_

NEW: \_\_\_\_\_ RENEWAL OF # \_\_\_\_\_ Vol. \_\_\_\_\_ Pg. \_\_\_\_\_

## COMMONWEALTH OF MASSACHUSETTS CITY OF GLOUCESTER

Date: \_\_\_\_\_

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

\_\_\_\_\_ is conducted at  
\_\_\_\_\_ Street, GLOUCESTER, MA 01930

State DOR requires you to provide either a Fed. ID # \_\_\_\_\_ or your SS # \_\_\_\_\_

By the following named persons:  
PRINT OR TYPE FULL NAME

RESIDENCE

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SIGNATURE

## THE COMMONWEALTH OF MASSACHUSETTS

\_\_\_\_\_ SS. \_\_\_\_\_ 20\_\_\_\_\_

PERSONALLY APPEARED BEFORE ME THE ABOVE NAMED

\_\_\_\_\_

AND MADE AN OATH THAT THE FOREGOING STATEMENT IS TRUE.

\_\_\_\_\_  
NOTARY PUBLIC

(seal)

My Commission Expires: \_\_\_\_\_