

Business Certificates
And
Common Questions About Filing
(MGL Chapter 110, Section 5)

Who Must File

Any person, whether individually or as a partnership, conducting business under any title other than the complete real name of the owner(s).

Any corporation doing business in a name other than its corporate name. The certificate must be completed and filed by a corporate officer.

Where Does One File?

File with the Town Clerk, either in person or by mail, in every city or town where an office of said business may be situated.

What About a Change?

Upon discontinuing, retiring or withdrawing from such business, or in the case of a change of residence of such person or of the location where the business is conducted, the owner(s) of the business must inform the Town Clerk.

Does a Business Certificate Expire?

A Business Certificate is in full force and effect for four (4) years from the date of issue. A new filing must be made every four years as long as the business is being conducted.

Does the Certificate Have to be Displayed?

No. However, you must provide a copy upon request.

Fees

Business Certificate Filing	\$25.00
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How to File

Complete the 2-page application below with the exception of the expiration date. Mail or deliver the application to the Town Clerk, 7 Main St., Whitinsville, MA 01588. If you do not appear in person at the Clerk's office to file, you must have your signature on the application notarized. The application will also require the Zoning Agent's approval before the Certificate is issued. Payment fee checks should be made payable to Town of Northbridge. For more information, call the Clerk's office at 508-234-2001.



TOWN OF NORTHBRIDGE
OFFICE OF THE TOWN CLERK
TOWN HALL - 7 MAIN STREET
WHITINSVILLE, MASSACHUSETTS 01588

DOREEN A. CEDRONE
TOWN CLERK

AREA CODE 508-234-2001

BUSINESS CERTIFICATE

Fee: \$25.00

Date _____

IN CONFORMITY WITH THE PROVISIONS OF CHAPTER ONE HUNDRED AND TEN, SECTION FIVE OF THE GENERAL LAWS, AS AMENDED, THE UNDERSIGNED HEREBY DECLARE(S) THAT A BUSINESS IS CONDUCTED UNDER THE TITLE OF

_____ AT _____
(Address)

BY THE FOLLOWING NAMED PERSON(S): (Include corporate name and title, if corporate office)

<u>Full Name</u>	<u>Residence and Telephone</u>
_____	_____
_____	_____

SIGNATURES:

On _____ the above named person(s) personally appeared before me and made oath that the foregoing statements are true.

Town Clerk, Assistant Town Clerk, Other

OR – This certificate has been Notarized as follows:

County:
State:

ON THIS _____ DAY OF _____, 20____, BEFORE ME, THE UNDERSIGNED NOTARY PUBLIC, PERSONALLY APPEARED _____ (name of document signer/s), PROVED TO ME THROUGH SATISFACTORY EVIDENCE OF IDENTIFICATION, WHICH WAS _____, TO BE THE PERSON(S) WHOSE NAME(S) IS/ARE SIGNED ABOVE, AND WHO SWORE OR AFFIRMED TO ME THAT THE CONTENTS OF THE DOCUMENT ARE TRUTHFUL AND ACCURATE TO THE BEST OF HIS/HER OR THEIR KNOWLEDGE AND BELIEF.

_____ (Official signature and Seal of Notary) Commission Expires _____

IN ACCORDANCE WITH THE PROVISIONS OF CHAPTER 337 OF THE ACTS OF 1985 AND CHAPTER 110, SECTION 5 OF MASSACHUSETTS GENERAL LAWS, **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 CITY CLERK UPON DISCONTINUING, RETIRING, OR WITHDRAWING FROM SUCH BUSINESS OR PARTNERSHIP.

COPIES OF SUCH CERTIFICATES SHALL BE AVAILABLE AT THE ADDRESS AT WHICH SUCH BUSINESS IS CONDUCTED AND SHALL BE FURNISHED ON REQUEST DURING REGULAR BUSINESS HOURS TO ANY PERSON WHO HAS PURCHASED GOODS OR SERVICES FROM SUCH BUSINESS. **VIOLATIONS ARE SUBJECT TO FINE OF NOT MORE THAN THREE HUNDRED DOLLARS (\$300) FOR EACH MONTH DURING WHICH SUCH VIOLATION CONTINUES.**

CERTIFICATE EXPIRES _____ (Four (4) yrs from effective date)

This Business Certificate registers your name and your business name in the Town of Northbridge, making you compliant with MGL Chapter 110, Sec. 5. It DOES NOT give you permission to operate the business. The acquisition of any licenses or permits required for the operation of your business is your responsibility.

MEMO

Date: _____

TO: James Sheehan, Inspector of Buildings/Zoning Agent

RE: Business Certificate Request

Name: _____

Address: _____

Telephone: _____

Has requested the issuance of a Business Certificate for a business located at:

For the following purpose:

Please review and state your opinion.

I have reviewed the attached Business Application and have determined the following:

_____ **Approved** _____ **NOT Approved**

James Sheehan
Inspector of Buildings/Zoning Agent

Date