

Ellen Agro



TOWN OF MENDON

TOWN CLERK

Mendon Town Hall

20 Main Street

Mendon, Massachusetts 01756

Telephone: (508)473-1085 Fax: (508)478-8241

BUSINESS CERTIFICATE

Filing Information

Required documents for a business certificate:

1. Completed application
2. Business/Home Occupation Permit from Building Department.
3. Contact Information Form.
4. Payment of \$40.00 submitted to the Town Clerk's office. Checks made out to "Town of Mendon"

* There is also a statement of discontinuance, change of residence, change of location, withdrawal or deceased from business or partnership form that needs to be filled out if any above reasons apply.

TOWN OF MENDON
Business Certificate

CONTACT INFORMATION

BUSINESS NAME:

BUSINESS ADDRESS:

OWNER with Official Title:

RESIDENTIAL ADDRESS (if different from above):

RESIDENTIAL PHONE NUMBER:

EMAIL ADDRESS:

ADDITIONAL OWNER:

RESIDENTIAL ADDRESS (if different from above):

RESIDENTIAL PHONE NUMBER (if different from above):

DESCRIPTION OF SERVICES OFFERED:

DATE: _____

FILING A BUSINESS CERTIFICATE (DBA)

WHAT IS A BUSINESS CERTIFICATE, DBA?

A Business Certificate is a local registration of a business that is conducted within the Town and filed with the Town Clerk, either in person or by mail, in every city/town where a business of any such person, partnership or corporation may be situated. It is commonly referred to as a “d/b/a/ (doing business as). The primary purpose of filing is to protect consumers or creditors by identifying the names and addresses of the owners of the business. Essentially, the public has a right to know who a business “is”, since a customer will not know who owns the business simply by the name of the business.

NOTE:

A BUSINESS CERTIFICATE IS NOT A LICENSE TO DO BUSINESS IN THE TOWN OF MENDON. ADDITIONAL LICENSE/PERMITS ISSUED BY OTHER TOWN DEPARTMENTS OR STATE AGENCIES MAY BE REQUIRED IN ORDER TO DO BUSINESS. PLEASE REFER TO THE TOWN OF MENDON ZONING BYLAWS FOR CONDUCTING BUSINESS IN THE TOWN OF MENDON. CHECK WITH THE BUILDING/PLANNING DEPARTMENT FOR CONFORMANCE WITH THE TOWN'S BUSINESS REGULATIONS.

WHO MUST FILE?

Any person conducting business under any title (business name) other than the complete real name of the person conducting the business must file a certificate. A person is defined as an individual, a partnership, or a corporation.

Exemptions to filing are allowed under MGL Chapter 110, Section 6 if the corporation is doing business under its true corporate name, or if a legal partnership is doing business under any title which includes the true surname of any person. Certain other exemptions exist for trusts and limited partnerships.

WHO MUST SIGN THE BUSINESS CERTIFICATE?

If the business is owned solely by one person, only that person needs to sign. If it is a partnership of two or more people (but not a formal legal entity), both or all the “partners” must sign. If it is a legal partnership, an officer who has authority to sign on behalf of the partnership may do so. If it is a corporation, an officer who has signatory authority must sign – which is usually the President, but not always. **All signatures must be made in front of a notary or the Town Clerk. Do not sign the certificate unless it is in front of one of these individuals. An individual must be 18 years of age or older to legally sign a business certificate.**

A Business/Home Occupation Permit from the Mendon Building Department is required prior to filing a d/b/a to ensure compliance with zoning regulations. This letter is needed if you are starting a new business.

Please direct any inquiries regarding a Business/Home Occupation Permit to the Mendon Building Department 508-473-2679. All other inquiries should be directed to the office of the Town Clerk.

EXPIRES:

BUSINESS CERTIFICATE \$40.00

The Commonwealth of Massachusetts
MENDON

_____, 20____

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

Name of Business

At an address of _____ in the Town of
Mendon, MA 01756

By the following named persons.

<i>FULL NAME</i>	<i>RESIDENCE</i>
_____	_____
_____	_____

Signed:
(Only sign in the presence of a notary or Town Clerk)

_____	_____
<i>Signature</i>	<i>Signature</i>
_____	_____
<i>Signature</i>	<i>Signature</i>

The Commonwealth of Massachusetts

_____ ss. _____, 20____

Personally appeared before me the above-named _____

and made oath that the foregoing statement is true.

Expiration Date _____

(SEAL)

Title

In accordance with the provisions of Chapter 337 of the Acts of 1985 and Chapter 110, Section 5 of the MA General Laws, Business Certificates shall be in effect for four (4) years from the date of issue and shall be renewed each four (4) years thereafter. A statement under oath must be filed with the Town 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 upon request during regular business hours to any person who has purchased goods or services from such business. Violations are subject to a fine of not more than \$300.00 for each month during which such violation continues.

BUSINESS CERTIFICATE

STATEMENT OF DISCONTINUANCE, CHANGE OF RESIDENCE, CHANGE OF LOCATION OF BUSINESS, WITHDRAWAL OR DECEASED FROM BUSINESS OR PARTNERSHIP.

1. In Conformity with the provisions of Chapter 110, Section 5 of the MA General Laws, the undersigned hereby declare (s) that we (I) have this day

_____ Discontinued _____ Withdrawn from

The business known as _____

Conducted at _____ Mendon, MA 01756 as set forth in the certificate filed on _____

And as attached.

NAME

ADDRESS

2. The location of the _____ business _____ my address as it appears on the attached certificate of _____ filed on _____ has been changed to _____.

3. As Executor or Administrator for the Estate of _____ who died on _____, I hereby request a ___ discontinuance ___ withdrawal of his /her name from the Business Certificate attached filed on _____ in the name of _____.

Signatures: _____

On _____ the above-named person(s) appeared before me and made oath that the foregoing statement is true.

_____ My commission expires: _____
Notary Public

Identification presented: _____

COMMONWEALTH OF MASSACHUSETTS
TOWN OF MENDON