



AMENDMENT OF TRADE NAME

A trade name certificate is required by Section 35-1 of the Connecticut General Statutes for the purpose of identifying individual businesses in the state under a fictitious trade name, i.e. for consumer protection purposes. A trade name certificate does not protect that name from use by anyone else. The penalty for failure to file a trade name certificate is \$500.00.

Trade Certificate is on file in the Town of Beacon Falls land records VOL _____ PG _____ On _____
Date of Trade Name Certificate

The undersigned do/does hereby certify that he/she/they own, conduct, and transact the business below and that there are no other persons associated with the undersigned in the conduct of said business, and that **address/addressees** given below is/are correct.

Type of Business

under the assumed name of _____

Name of Business (DBA)

Business Address: _____

Phone Number: _____

The full name of every person conducting or transacting said business, together with the mailing address of each of the said persons is as follows:

On this _____ day of _____ 20 ____

Name _____
Print

Signature

Residence Address: _____

Name _____
Print

Signature

Residence Address: _____

I understand and agree that I am responsible to notify the Town of Beacon Falls if any changes occur or if there is a closure of my business by filing an amendment form/termination form: FEE: \$10.00.

STATE OF CONNECTICUT }

ss} _____

County of } _____

On this _____ day of _____ 20 __ , before me, the undersigned notary public,

personally appeared: _____

and satisfactory proven to be the person/s whose name is subscribed to the within instrument and acknowledges that he/she/they executed the same for the purposes therein contained.

IN WITNESS WHEREOF I HEREUNTO SET MY HAND.

My Commission Expires: _____

*Notary Public, Justice of the Peace,
Commissioner of the Superior Court*

The above and foregoing is a true copy of the original certificate on file in the office of the Town Clerk, Beacon Falls, CT.

Attest: _____

Town Clerk

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS.

FILING FEE: \$10.00. Please Make Checks payable to: "Beacon Falls Town Clerk"