



Theodora K. Eaton, MMC Town Clerk

## The Commonwealth of Massachusetts Town of Needham

1471 Highland Avenue, Needham, MA 02492 Tel: 781-455-7500 / Fax: 781-455-1246

Certificate #
Issue Date:
Expiration Date:

Name of Business:	is conducted at
Address of Business.	
Type of Business:	Telephone Number:
	<b>following named persons:</b> ** If a corporation is the owner, please provide the name and title of the signing officer.
Full Name	Street/City or Town/State/Zip Code
Full Name	Street/City or Town//State/Zip Code
Full Name	Street/City or Town/State/Zip Code
Full Name	Street/City or Town /State/Zip Code
Signed	
(Signature)	(Signature)
(Signature)	(Signature)
	The Commonwealth of Massachusetts
SS.	, 20
Personally appeared before me the above na and made oath that the foregoing statement	
years thereafter so long as such business sha	ection shall be in force and effect for four years from the date of issue and shall be renewed each four l be conducted and shall lapse and be void unless so renewed. A statement under oath must be filed wit tring or withdrawing from such business or partnership. (M.G.L. Chapter 110, s. 5 and Ch. 337 of the
My Commission Expires:	
(Seal)	
	Title

Pursuant to MGL Ch. 62C, Sec. 49A:			
I certify under the penalties of perjury that I, to the best of my knowledge and belief, have read and am in Compliance with the contents of MGL Chapter 62C, Section 49A (included with this application.			
Signature of Applicant (mandatory)	By Corporate Officer (if applicable)		
Either a Social Security Number or Federal Identification Number Must be Supplied	Date		
Federal Identification Number Must be	Date		

This License will not be issued unless this certification clause is signed by the applicant