

City and Town Clerk 888 Washington Blvd Stamford, CT 06901 (203) 977-4054

## Filing a new trade name is \$10.00 Amending a trade name is \$10.00 (Plus \$3.00 per certified copy) Form must be notarized

\* Make check or money order payable to the City of Stamford

CERTIFICATE OF REGISTRATION OF TRADE NAME			
Please check off one:	□ NEW	☐ AMEND	
The undersigned hereby certifunder the full trade name of:	y that (I, we,) (am, are)	conducting business in sa	id City of Stamford, Connecticut,
Print trade name/DBA above)			
Print a <b>BRIEF</b> description of the	trade name/DBA		
Print the physical address of the	business including zip co	de) P.O. BOX NOT ACCEPTE	ED
The full name of every person persons is as follows:	conducting and transa	cting said business togethe	er with the resident address of each of s
OWNER'S NAME OR E	BUSINESS ENTITY (INC	C, LLC, LLP, etc.)	SIGNATURE
Name:			
Street Address:			(Print Name)
Name:			(Fillit Name)
Street Address:			(Print Name)
Name:			(Fillthame)
Street Address:			(Print Name)
			·
STATE OF	 ss.: (CITY/	TOWN)	
COUNTY OF			
On this the day of _	20	, before me	the
indersigned officer, personall	y appeared		known to me (or
• • • •	. , ,		instrument and acknowledged that
ne/she/they executed the san		rein contained.	
n witness whereof I have her	eunto set my nand.	Signature of Notary Publ	ic/Commissioner of Superior Court
The above and foregoing is a of Stamford.	true copy of the origina	al certificate on file in the c	ffice of the Town Clerk of the City
		Attest:	
			Town Clerk