



## *Town of Lexington*

### **Town Clerk's Office**

Nathalie L. Rice, Town Clerk

Tel: (781) 698-4558  
Fax: (781) 861-2754  
[www.lexingtonma.gov](http://www.lexingtonma.gov)

In accordance with the Provisions of the Chapter 337 of the Acts of 1985 and Chapter 110, Section 5, of the Massachusetts General Laws, Business Certificates shall be in effect for four years from the date of issue and shall be renewed every four years thereafter.

If you are conducting business in Lexington under any title other than the real name of the person conducting the business, whether individually or as a partnership, you will need to file a business certificate. A statement must be filed with the Town Clerk upon discontinuing, retiring, or withdrawing from such business or partnership

Please complete the enclosed form in **black ink**, have it notarized, and return it to the Town Clerks Office with a check for \$25.00 payable to the Town of Lexington. We will file the certificate and issue you a copy for your records. Once the certificate is filed at the Town Clerk's Office, it will be in force for four years from the date of issue and will need to be renewed each four years thereafter so long as such business shall be conducted.

If you have any questions, please call our office at 781-698-4558, or e-mail us at [townclerk@lexingtonma.gov](mailto:townclerk@lexingtonma.gov).

Town Clerk



TOWN OF LEXINGTON, MASSACHUSETTS  
OFFICE OF THE TOWN CLERK

**BUSINESS CERTIFICATE**

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 being conducted in the town of Lexington under the

NAME OF BUSINESS: _____
ADDRESS: _____ LEXINGTON, MA Zip _____
BUSINESS TELEPHONE #: _____
E-MAIL ADDRESS: _____
NATURE OF BUSINESS: _____

by the following named person(s), including title, if corporate officer.

<u>Print Officer's Full Name</u>	<u>Signature of Officer</u> (signature must be notarized)
1. _____	1. _____
Residential Address: _____ City _____ State _____ Zip _____	

<u>Print Officer's Full Name</u>	<u>Signature of Officer</u> (signature must be notarized)
2. _____	2. _____
Residential Address: _____ City _____ State _____ Zip _____	

On \_\_\_\_\_ the above, named person(s) personally appeared before me and made the oath that the foregoing statement is true.

(Seal exp. date) \_\_\_\_\_ Notary Public \_\_\_\_\_

Identification of Officers Signature that are notarized:

- 1.  Drivers License  Passport  Other: \_\_\_\_\_ ID Number \_\_\_\_\_
- 2.  Drivers License  Passport  Other: \_\_\_\_\_ ID Number \_\_\_\_\_

In accordance with the provisions of Chapter 337 of 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 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 on 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 Three Hundred Dollars (\$300) for each month during which such violation continues.

<b>OFFICE USE ONLY</b>	
Office of the Town Clerk	Certificate Number: _____
Date Received & Filed: _____	Expiration: _____
By: _____	Renewal _____ New _____