



# 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"