Bloomfield Town Clerk **Registration of Trade Name**

The undersigned hereby certify that (I, We,) (am, are) Conducting business in said Town of Bloomfield, Connecticut, under the full trade name of:

_____

(Print Business Name Above)

_____

(Print the Street and City Address of the Business)

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

PRINT YOUR NAME	SIGNATURE
NAME:_____	_____
HOME ADDRESS: _____	
NAME:_____	_____
HOME ADDRESS: _____	
NAME:_____	_____
HOME ADDRESS: _____	

STATE OF CONNECTICUT)
) SS: BLOOMFIELD _____, 20_____
COUNTY OF HARTFORD)

Personally appeared _____
Who subscribed the foregoing certificate, and acknowledged that (he, she, they) executed the same before me.

_____

Date and Index No: _____ Notary Public

My commission expires:

Received by:_____

****PLEASE CHECK WITH THE ZONING DEPARTMENT (860-769-3515) FOR THEIR APPROVAL PRIOR TO FILING YOUR TRADE NAME.