**This certificate is not a certification that the conduct of the below named business, at the below named address is in accordance with the by-laws, rules, or regulations of the Town of Wayland**

 **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address of Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mailing Address if Different: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Nature of Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |
| --- | --- | --- |
| **Owner** | **Residential Address** | **Signature** |
| **1.** |  |  |
| **2.** |  |  |
| **3.**  |  |  |

**The Commonwealth of Massachusetts**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Personally appeared before me the above-named person(s) and made oath that the foregoing statement is true**

**…………………………………………………………………(Identifictaion)…………………………..**

**…………………………………………………………………(Identifictaion)…………………………..**

**A certificate issued in accordance with this section shall be in force and effect for four years from the date of issue and shall be conducted and shall lapse and be void unless so renewed.**

**Business Certificate Expiration Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 (Seal) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Notary/Town Clerk/Assistant Signature

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Notary/Town Clerk/Assistant Print