

**TOWN OF BARRINGTON, RHODE ISLAND  
CERTIFICATE OF TRADE NAME**

**Filed under provisions of §6-1-2 of the General Laws of R.I. 1956, as amended.**

This is to certify that I/we, the undersigned, am/are

Full Name \_\_\_\_\_ Address \_\_\_\_\_ City/Town \_\_\_\_\_

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

the sole owner/owners of the business conducted under the name

\_\_\_\_\_

at \_\_\_\_\_ Barrington, R.I.  
street address

Signature of Owner(s):

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

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public/Expiration Date

Town Clerk's Office: Date Filed: \_\_\_\_\_

**WITHDRAWAL AS OWNER OR OWNERS**

This is to certify that the undersigned is/are no longer connected with the above-named concern and request that my/our name(s) be withdrawn as such owner(s).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness

Town Clerk's Office: Date Filed: \_\_\_\_\_

Filing fee \$10.00 payable to the Town of Barrington.