

**TOWN OF WEST WARWICK
TRADE NAME CERTIFICATE
FILED UNDER THE PROVISIONS OF TITLE 6 CHAPTER 1 OF THE
GENERAL LAWS OF RHODE ISLAND, 1956, AS AMENDED.**

This is to certify that _____ the undersigned

Full Name Address, City/Town, State Phone #

Type of Business:

_____ the sole owner(s) of the business conducted under the name of

_____ at _____

_____, West Warwick, RI

**Signatures of all owners
must be subscribed in
space opposite.**

**STATE OF RHODE ISLAND
COUNTY OF KENT**

**In West Warwick, in said County, this ____ day of _____, 20__ personally
appeared before me the above subscribed:**

and made oath that the above statements signed by _____ are true.

**Notary Public
My Commission Expires:**