



Town of Mount Desert

Joelle D. Nolan, Town Clerk
21 Sea Street, P.O. Box 248
Northeast Harbor, ME 04662-0248

Telephone 207-276-5531 Fax 207-276-3232
E-mail Address jnolan@mtdesert.org Web Address www.mtdesert.org

STATE OF MAINE

**CERTIFICATE OF SOLE PROPRIETOR
ADOPTING NAME OTHER THAN HIS OWN
(Title 31, M.R.S.A., Sec. 2)**

The undersigned hereby certifies that he/she intends to engage in the following business

_____ (type of business)

as sole proprietor thereof, and adopting the following name, style, or designation

_____ (name of business)

in the conduct of said business in the Town of Mount Desert at the location of

_____ (street address where business conducted)

Printed Name & Signature

Mailing Address & Phone Number

State of Maine Hancock County §

Personally appeared before me the above signed said _____
and made oath to the truth of the above certificate on this _____ day of _____ 20_____.

Municipal Clerk/Notary Public/Attorney at Law
Printed Name _____
Commission Expires: _____

Town Clerk's Office, Mount Desert
Date Received: _____

\$10.00 Fee Paid: _____

Attest: a True Copy

Town Clerk

PC: Assessor's Office
Code Enforcement Officer