



TOWN OF CUMBERLAND – OFFICE OF THE TOWN CLERK
45 BROAD STREET, CUMBERLAND RI 02864
(401)728-2400 FAX (401)724-1103

BUSINESS CERTIFICATE APPLICATION

\$100 Filing fee

Filed under the provisions of Title 6, Chapter 1, Section 1 of the General Laws of Rhode Island, 1956, as amended.

BUSINESS INFORMATION:

Certificate Number _____ Tax ID Number _____

Type of Business _____

Business Name _____

Business Address _____

Business Mailing Address, if different _____

Business Phone Number _____

Business Fax Number _____

PROPERTY LOCATION INFORMATION:

Assessor's Plat _____ Lot(s) _____ Zone _____

Building Official Approval of Zoning Designation _____

Date Approved _____

Property Owner Name and Address if location is leased _____

 Property Owner's Signature

STATE OF RHODE ISLAND
COUNTY OF PROVIDENCE

In Cumberland, in said County, on this _____ day of _____, 20____, personally appeared before me the above-subscribed person(s) and made oath that the above statements signed are true.

 Notary Public

My Commission Expires: _____

BUSINESS OWNER #1 INFORMATION:

Business Owner #1 Name

Owner Home Address

Home Phone Number

Cell Phone Number

E-Mail

Owner Date of Birth

Place of Birth

BUSINESS OWNER #2 INFORMATION (if applicable):

Business Owner #2 Name

Owner Home Address

Home Phone Number

Cell Phone Number

E-Mail

Owner Date of Birth

Place of Birth

OWNER #1 SIGNATURE

PRINT NAME

OWNER #2 SIGNATURE

PRINT NAME

STATE OF RHODE ISLAND
COUNTY OF PROVIDENCE

In Cumberland, in said County, on this _____ day of _____, 20____, personally appeared before me the above-subscribed person(s) and made oath that the above statements signed are true.

Notary Public

My Commission Expires: _____

DATE FILED IN TOWN CLERK'S OFFICE: _____

RECEIVED BY: _____