

State of Maine
TOWN OF HARPSWELL

CERTIFICATE OF ASSOCIATION FOR PURPOSE OF ENGAGING IN MERCANTILE ENTERPRISE
(Title 31 M. R. S. A. Section 1)

The undersigned hereby certify that they have become associated as partners or otherwise
for the purpose of engaging in the _____
(type of business)

business, under the partnership name (or d/b/a) with the name, style or designation of
_____ in the conduct of said business.
(name of business)

Business Location Address _____, _____ Zip Code

www. _____
Business Website Email

Printed Name of PARTNER _____ Residence Address _____ Signature (signature must be
witnessed by Notary/Attorney)

Phone Number _____

Printed Name of PARTNER _____ Residence Address _____ Signature (signature must be
witnessed by Notary/Attorney)

Phone Number _____

BELOW INFORMATION MUST BE COMPLETED BY A NOTARY PUBLIC OR ATTORNEY
STATE OF MAINE

Cumberland County, SS. _____ A.D. 20__

Then _____, personally appeared and
severally made oath to the foregoing certificate, that the same is true.

Before me,

Attorney or
Notary Public (Commission Expires _____)

**Note: This certificate shall be deposited in the Town of Harpswell Office of the Town Clerk in
which the business is to be carried on. The Clerk is entitled to a fee of Ten dollars (\$10.00)
for recording this certificate.**