

## ASSUMED NAME CERTIFICATE FOR AN INDIVIDUAL

Sylvia M. Rowan, County Clerk Herkimer County Clerk's Office 109 Mary Street, Suite 1111 Herkimer, NY 13350-2923 (315) 867-1133, 1135, or 1596

## I HEREBY CERTIFY THAT:

My Name is		
I reside at the address of (street, city, state and zip code)		
		County of Herkimer, State of New York
I am eighteen years of age or older (If under the age of eightee	n, state age	)
I am conducting or transacting business in the Cou	nty of Herkimer und	der the name or designation of:
At the address of (street, city, state and zip code)		
		County of Herkimer, State of New York
Mailing Address of Business (if different)		
I am successor in interest to the following person, who former (person's name)	•	
Type of business (optional):		
Telephone (optional):E	-Mail (optional):	
IN WITNESS WHEREOF, I have signed this certificate on this _	day of	., 20
State of New York ) County of Herkimer ) ss.:		
On before me, the undersigne personally known to me or proved to me on the basis of satisfit to the within instrument and acknowledged to me that he/she his/her signature on the instrument, the individual, or the personal satisfies the signature of the instrument.	actory evidence to be t executed the same in h	he individual whose name is subscribed is/her capacity(ies), and that by
	(SIGNATURE AND OFFIC	E OF INDIVIDUAL TAKING ACKNOWLEDGMENT)

The filing of an assumed name certificate is pursuant to General Business Law Sec. 130. One Certificate form is provided by the County Clerk's Office at no charge. There is a \$1.00 per form charge, for additional forms. The Filing Fee is \$25. A certified copy of the original or most recent amended certificate shall be conspicuously displayed on the premises at each place in which the business for which the same was filed is conducted. The fee for a certified copy is \$5. There will be \$1.30 charge for additional photocopies (the bank may require to see proof of filing).