



TRADE NAME CANCELLATION

To the Town Clerk of the Town of SUFFIELD

I _____ am no longer conducting and transacting business in said **Town of Suffield** under the full name of:

(Name of Company)

(Business Address)

(Type of Business Conducted)

(Contact Phone Number Regarding Cancellation)

The full name of every person no longer conducting or transacting said business, together with the street and post office address of each of said persons is as follows:

Name _____

Address _____

Name _____

Address _____

Name _____

Address _____

Signatures _____

State of Connecticut

ss. Suffield

County of Hartford

Date _____

Personally appeared _____

Who subscribed and swore to the truth of the foregoing certificate, and acknowledged that _____ executed the same before me.

Town Clerk – Notary public
Received and filed _____

Justice of the Peace
Commissioner of the Superior Court

File Number _____

A fee of \$ 10.00 shall be submitted with this application