Certificate of Doing Business Under Assumed Name ("D/B/A")

FOR ONE INDIVIDUAL PERSON

Albany County Clerk’s Office, County Court House Room 128, Albany NY 12207    (518) 487-5100
Bruce A. Hidley, Albany County Clerk -  www.albanycounty.com/clerk/

IT IS ESSENTIAL THAT YOU PLEASE PRINT CLEARLY OR TYPE THIS FORM!

PURSUANT TO SECTION 130 OF THE GENERAL BUSINESS LAW OF NEW YORK STATE

1. I certify that my name is (print name) ____________________________________________________________

2. I am eighteen years of age or older (or, if less than eighteen, my age is ____________________________ years.)

3. I live at (street address)________________________________________________________________________

in (city) ______________________________________     (state) _____________________    (zip)______________

4. I intend to do business in ALBANY COUNTY at the following address:

_________________________________________________________________________________________

in (city or town) ____________________________, New York,        zip code: _________________

5. I will do business under the name _______________________________________________________________

____________________________________________________________________________________________________________

6. (Optional) I further certify that I am the successor in interest to the following person, who formerly used
this name or names to conduct or transact business (person’s name) _______________________________________ 

My signature:__________________________________________________________    Date:_________________

STATE OF NEW YORK )
COUNTY OF ALBANY ) SS.:

On this _________________ day of _______________________, 20___, before me, the undersigned, personally appeared

personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to
the within instrument and acknowledged to me that he/she executed the same in his/her capacity and that by his/her signature on
the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

(signature and office of individual taking acknowledgment – Notary Public or Commissioner of Deeds)

Instructions: Use this form for a DBA by INDIVIDUAL(S). Complete the form BUT DO NOT SIGN IT
until in the presence of a Notary Public or Commissioner of Deeds. My staff are Commissioners of
Deeds and can witness your signature at no charge if you wish. You will need a Photo ID (e.g.
Driver’s License.) Bring the form with you to the Albany County Clerk’s office at County Court House
Room 128, Albany NY 12207, together with $25 in cash (or a certified check payable to “Albany
County Clerk.”) You will want at least one certified copy at $5 per copy. Our office hours are 8:30AM
to 4:30PM Monday through Friday except holidays. You will need quarters for the parking meters. If
you have any questions on this filing, please call us at (518) 487-5100.There are other forms for
Partnerships filing DBAs, as well as amendment and termination forms. These may be purchased at
legal supply stores or prepared by your attorney. Legal questions should always be addressed by an
attorney. We appreciate your business!

Bruce A. Hidley, Albany County Clerk

DBAf:01/02/2014