



Office of the Town Clerk
Elizabeth T. Greendale, CMC

703 Washington Street
Holliston, MA 01746

Telephone: 508-429-0601 Fax: 508-429-0642
OFFICE HOURS: MON, WED, THU 8:30 AM- 4:30 PM
TUE 8:30 AM-7:00PM and FRI 8:30 AM-1:00PM

Application for a Business Certificate

This is NOT a license to do business. It is a registration of the business name only. (The issuance of this certificate does not relieve the proprietor of responsibility for conforming to the provisions of the Town of Holliston Zoning By-laws).

Name of Business _____

Business Address _____

Business Telephone # _____

Type Of Business _____

Owner(s) Name _____

License or Registration # from the DOS (Division of Occupational Safety):
(Department of Labor and Workforce Development) **If Applicable** _____

Home Address _____
(if different than business)

Home Telephone # _____
(if different than business)

Email Address _____

Signature _____

The fee is 20.00
The certificate is valid for 4 years from date of issuance