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For Office Use:
Certificate # _____
50 Day Deadline _____
Clerk's Initials _____

FILE STAMP:

**Assumed Business Name
Certificate of Registration of Ownership of Business
Notice (Filing fee of \$5.00)**

Name of Business: _____

Nature of Business: _____
(Describe the service or type of business)

Address(es) where business is to be conducted or transacted in this county:

(Business Street Address) (City) (State) (Zip) (Phone)

(Business Street Address) (City) (State) (Zip) (Phone)

I am requesting registration at a confidential address, per 805 ILCS 405/1a. Insert the County Clerk's address above as the address where business is to be conducted, as well as as owner and complete the Confidential Address Addendum (obtained from the Assumed Business Name Department).

Name(s) as it appears on your ID and residence address(es) of the person(s) owning, conducting or transacting business:

(Print Owner's Name)

(Print Owner's Name)

(Home Street Address)

(Home Street Address)

(City) (State) (Zip) (Phone)

(City) (State) (Zip) (Phone)

(Print Owner's Name)

(Print Owner's Name)

(Home Street Address)

(Home Street Address)

(City) (State) (Zip) (Phone)

(City) (State) (Zip) (Phone)

**STATE OF ILLINOIS }
COUNTY OF WILL }**

This is to certify that the undersigned, upon oath deposes and says that the foregoing is a true certificate for the Assumed Business Name and intends to conduct or transacts business from the location(s) indicated and that the true or legal full name(s) of the person(s) owning, conducting or transacting the business is/are correct as shown.

(Signature) **As it appears on ID**

(Signature) **As it appears on ID**

(Signature) **As it appears on ID**

(Signature) **As it appears on ID**

The foregoing instrument was acknowledged before me by the person(s) intending to conduct the business this _____ day of _____, 20____.
(Day) (Month) (Year)

Signature of County Clerk -or- Notary Public