

Worth Township Treasurer
Jennifer Woodruff
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Email treasurer@worthmi.org

WBRC Filing No. _____
Date Filed: _____
Expiration Date: _____
Processing Fee: 15.00

Business Registration Certificate

THE UNDERSIGNED hereby certifies, under the provisions of P.A. No. 101, P.A., of Michigan For the year 1907, as amended, that the following person now owns, carries on, conducts or transacts, or intends to own, carry on, conduct or transact a business or an office or place of business in the State of Michigan, County of Sanilac, Township of Worth, under the name designation or style set forth below.

Name of Business: _____

Address of Business: _____

Mailing address: (If Different) _____

Type of Business: _____

Telephone No. (_____) _____ - _____ Fax No. (_____) _____ - _____

Name of person owning, conducting, transacting, or composing the above business address.

Name of person: _____

Owners Residence Address: _____

(Street, City, State, & Zip)

Signature of person listed above

(Signature)

A valid copy of liability Insurance must be Included and submitted with this Business Registration Certificate application.

If one is not included the Business Registration Certificate is incomplete and will not be accepted by Worth Township as a registered company/ business with Worth Township. Worth Township is not liable or responsible for any business conducted by said companies, individuals or employees.