

WARNING: The filing of this application and its approval by the Division does not authorize the use in the state of Utah of an assumed name in violation of the rights of another under federal, state, or common law (U.C.A. Section 42-2-5 Et seq.). *When approved the DBA is registered for 3 years. *If adding or removing an Applicant/Owner, which will affect its status as a General Partnership or Sole Proprietorship, you must submit a Registration Information Change Form. *If you want a new name (adding or changing the existing name), a new DBA filing is required. Non-Refundable Processing Fee: [] New Filing \$22.00 Applicant/Owner Transfer N/A **Requested Business Name: Business Purpose: Business Address:** Address City State Zip Who/What is the name of the Registered Agent (Individual or Business Entity or Commercial Registered Agent)?: The address must be listed if you have a non-commercial registered agent. See instructions for further details. Address of the Registered Agent: Utah Street Address Required, PO Boxes can be listed after the Street Address State UT Zip: **Applicant/Owner:** List the individual or business Entity Number (if a registered business): entity that will own the DBA on the name line. Address: State: Zip: City: __ (The registered agent will be recorded as the applicant/owner if Under penalties of perjury, I declare that this DBA Application has been examined by me and is, to the best of my this section is left blank) knowledge and belief, true, correct and complete. Signature: **Applicant/Owner:** Name: List the individual or business Entity Number (if a registered business): entity that will own the DBA on the name line. Address: State: Zip: City: _ If needed, you may use an Under penalties of perjury, I declare that this DBA Application has been examined by me and is, to the best of my attached sheet for additional

Signature: Under GRAMA (63-2-201), all registration information maintained by the Division is classified as public record. For confidentiality purposes, you may use the

business entity physical address rather than the residential or private address of any individual affiliated with the entity.

Optional Inclusion of Ownership Information: This information is not required.

Is this a female owned business? Yes

applicants

No

knowledge and belief, true, correct and complete.

Is this a minority owned business? Yes No If yes, please specify: