

Certificate of Status of Business Person

The undersigned _____
(name and address of official authority)

certifies that _____
(name of business person)

_____ *(nature of activity)*

_____ *(address of the establishment)*

is a registered business person in _____
(name of country)

*his/her registration number is

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Date _____
(DD/MM/YYYY)

Office date stamp

Signature _____

Name _____

Grade _____

*If the applicant does not have a registration number, the official authority should state the reason for this.