



**Commonwealth of Massachusetts  
Division of Occupational Licensure  
Office of Public Safety and Inspections**  
1000 Washington Street, Suite 710  
Boston, Massachusetts 02118  
Phone (617) 701-8600  
<https://www.mass.gov/dpl/opsi>

## REQUEST FOR CERTIFICATE OF GOOD STANDING

PLEASE EMAIL THIS COMPLETED FORM TO OPSI-INFO@MASS.GOV WITH THE SUBJECT LINE "CERTIFICATE OF GOOD STANDING" –OR– MAIL TO THE ADDRESS ABOVE ATTN: CERTIFICATE OF GOOD STANDING REQUEST

Print/type clearly all information.

<b>Name:</b>
<b>License Type(s):</b>
<b>License Number(s):</b>

Certificate should be addressed to:

Licensee

Other (Specify Below)

<b>Name:</b>
<b>Address:</b>
<b>City/Town:</b>
<b>State:</b>
<b>Zip Code:</b>
<b>Buisness Name:</b>

Certificate should be mailed to:

Licensee's Address on File

Other (Specify Below)

<b>Name:</b>
<b>Address:</b>
<b>City/Town:</b>
<b>State:</b>
<b>Zip Code:</b>
<b>Buisness Name:</b>