

CONNECTICUT UCC INFORMATION REQUEST FORM

INSTRUCTIONS

Please type or print this form. Be sure it is completely legible. Read all Instructions. Follow Instructions completely. Do not insert anything in the open space in the upper portion of this form. It is reserved for filing office use.

1. Debtor name:

Enter only one Debtor name, EITHER an individual debtor's name in 1A, or an organization's name in 1B, not both.

Enter Debtor's exact full legal name. Do not abbreviate.

Do not use Debtor's trade name, DBA, AKA, FKA, Division name etc. in place of or combined with Debtor's legal name.

1A. **Individual Debtor.** "Individual" means a natural person.

1B. **Organization Debtor.** "Organization" means an entity having a legal identity separate from its owner.

2. Information Request Type

2A. Check the box in item 2A; if you are requesting a search of all active records, including lapsed filings.

2B. Complete item 2B if you are ordering copies of specific records by record number.

MAILING ADDRESS:

OFFICE OF THE SECRETARY OF THE STATE
BUSINESS SERVICES DIVISION CONNECTICUT
P.O. BOX 150470
HARTFORD, CT 06115-0470

DELIVERY ADDRESS:

BUSINESS SERVICES DIVISION
CONNECTICUT SECRETARY OF THE STATE
165 CAPITOL AVE
HARTFORD, CT 06106

PHONE: 860-509-6002

WEBSITE: www.concord-sots.ct.gov