

MUNICIPAL LIEN CERTIFICATE FORM

Date: _____

I, _____ hereby request a lien certificate.

Paid by: _____

Address: _____

Telephone: _____ Cell Phone: _____

Fax: _____

Property Assessed to: _____

Property Address: _____

Map _____ Lot _____

Please enclose completed form and check made payable to the Town of Easton.

Mail to: Town of Easton
 Treasurer's Office attn: Kathleen Finn
 136 Elm Street
 North Easton, MA 02356

Enclose a self addressed stamped envelope for the return of your MLC.

\$25.00 Residential properties
\$100.00 Multi family unit (4 or more)
\$150.00 Commercial/Industrial properties

All requests will be returned within 10 business days of receipt.