

TOWN OF RAYNHAM

OFFICE OF TAX COLLECTOR

558 South Main Street
Raynham, Massachusetts 02767
(508) 824-2702

MUNICIPAL LIEN CERTIFICATE REQUEST

Date _____

I, _____, do hereby request a Certificate

of Lien on property located in the Town of Raynham as follows:

Name of Property Owner _____

Current Owner

Property Location: _____

Map _____ Parcel _____ Book _____ Page _____
From Assessors Map if Known

Requested By:

Name _____

Address _____

Signature _____

Telephone # _____

Please indicate: **SALE** _____ **REFINANCE** _____

Enclose a check for \$50.00 per certificate requested, regardless of residential or commercial and include a self-addressed stamped envelope.