



TOWN OF FREETOWN
TREASURER/COLLECTOR'S OFFICE
3 NORTH MAIN ST., P.O. BOX 438
ASSONET, MA 02702

Municipal Lien Request
(All Fields Must Be Completed)

Date: _____

Requested by:

Name: _____

Address: _____

Telephone: _____

PROPERTY INFORMATION

Parcel ID (Map & Lot) _____

Street Address _____

Assessed Owner _____

Reason for Request (*check one*)

Sale _____ Refinance _____ Foreclosure _____ Planning Board _____

Fees: Residential Property: \$50.00 *per parcel*
Commercial Property: \$100.00 *per parcel*

Please return this form to the Collector's Office by mail with a self-addressed Stamped envelope or in person with the correct fee amount.