CERTIFICATION OF TREASURER/COLLECTOR

(MGL c.40,§57; WMC 3-24)

Office Use Only: DEPARTMENT

*** FAXES OR SIGNATURE COPIES WILL NOT BE ACCEPTED ***

NOTE - ALL LINES MUST BE COMPLETED. If any line is not applicable please write "N/A"

Property Address of Residence/Business: _____

Real Estate Owner Name(s): _____

Real Estate Owner(s) Business Name: _____

Real Estate Owner's Residential Address *(if different)*: _____

_____ Telephone Number: _____

Tenant/Lessee Name: _____

Business Name: _____

Tenant's Address: _____ Telephone Number: _____

Check one: ☐ Residential ☐ Individual/Sole Proprietor ☐ Corporation

☐ Trust ☐ Other _____

APPLICANT TO COMPLETE: **Failure to complete may result in delay of permit processing.**

*Parcel which directly relates to the application filed for which certification is sought. (***This numeric I.D. can be found: http://data.visionappraisal.com/WoburnMA/, on a tax bill, at the Building or Assessors offices***).

(Example: 12-34-56) Map _____ Block _____ Lot _____

Does **Real Estate owner and/or tenant own or **have a beneficial or financial interest** (partnership, trust, LLP, etc.) in **any other parcels** of real estate within the city of Woburn? *Circle one:* **NO** **YES** If **YES**, insert Map, Block, and Lot below. Use back of form, if necessary.

Map _____ Block _____ Lot _____

Map _____ Block _____ Lot _____

I certify under the penalties of perjury that I am the record owner or tenant of the within described property and the above information is accurate and complete.

_____ _____

Date Signature of Applicant Property Owner or Tenant (Not contractor)

_____ _____

Title Print Name

(For Office Use Only) **CERTIFICATION OF TREASURER/COLLECTOR**

The records of this office indicate that there are no unpaid real estate taxes, municipal fees, liens or other municipal charges outstanding and unpaid, or for the payment of which the owner has entered into a payment agreement with this office, on the above described parcels as of:

_____ (Certification Date)

EXPIRES: _____ (Residential Only)

_____ Treasurer/Collector

(Rev.4/20/06) For copies of this form: http://cityofwoburn.com/government_offices/city_departments/building.html