

TOWN OF PALMER OFFICE OF THE ASSESSOR
4417 MAIN ST, STE 5, PALMER, MA 01069
TEL 413.283.2607 FAX 413.283.2637

REQUEST FOR ABUTTERS LIST

NAME _____	TEL: _____		
ADDRESS: _____ _____			
LOCATION OF PROPERTY: _____			
MAP & LOT: _____	DEED REFERENCE: _____ Book/Page/Date		
Please check the board you are requesting the list for:			
PLANNING <input type="checkbox"/>	CONSERVATION <input type="checkbox"/>	APPEALS <input type="checkbox"/>	OTHER _____
_____	_____	_____	_____
SIGNATURE _____	DATE _____		

ASSESSORS USE ONLY	
Report done by: _____	Notes: _____
Amount Paid _____	Rec'd by: _____ Date: _____
I certify that this is an accurate copy of the list of abutters as taken from the most recent tax list. This also includes deeds dated through _____.	
_____	_____
SIGNATURE _____	TITLE _____
_____	_____
Date _____	