



Kathleen McCarthy
Treasurer-Collector

Request for Municipal Lien Certificate

Requestor's Name: _____

Requestor's Address: _____

Requestor's Tel #: _____

Owner of Record: _____

Property Address: _____

Parcel ID: _____
(Map Block & Lot)

Please Indicate: Sale Refinance *(circle one)*

Please return this form to the Collector's office with a \$50.00 check made payable to the Town of Pembroke, and a stamped self-addressed envelope.

Requestor's Signature

Date