



CITY OF FITCHBURG

ASSESSOR'S OFFICE
FITCHBURG, MASSACHUSETTS 01420

REQUEST FOR INFORMATION REQUESTED:

_____ LIST OF ABUTTERS \$10.00

_____ LIST OF ABUTTERS WITH MAILING LABELS \$15.00

SUBJECT PROPERTY ADDRESS: _____

MAP _____ BLOCK _____ LOT _____

PLANNING _____ ZONING _____ CONSERVATION COMMISSION _____ LIQUOR LICENSE _____

100 Ft. ABUTTERS _____ 300 Ft. ABUTTERS _____ DIRECT ABUTTERS _____

REQUEST FOR CUSTOM REPORTS: Be specific for custom reports

_____ COMPLEX CUSTOM REPORT, Contact office for price based on complexity

REQUESTED (Give a detailed description of the information you are requesting):

COMPANY NAME: _____ CONTACT NAME: _____

MAILING ADDRESS: _____ TELEPHONE NUMBER: _____

MAIL TO ABOVE ADDRESS - Upon payment of balance. _____

CALL WHEN READY FOR PICKUP

A MINIMUM DEPOSIT OF 50% REQUIRED WITH EACH REQUEST.

Date _____

Deposit Rec'd _____

Rec'd by _____