



TOWN OF HARDWICK

Jessica R. Crawford

Treasurer

PO BOX 575

GILBERTVILLE, MA 01031

Telephone (413) 477-6197 Ext. 117 treasurer@townofhardwick.com

Application for Municipal Lien Certificate

Date: _____

Name of Requestor: _____

Mailing Address: _____

Town/State/Zip: _____

Phone: _____

Provide a SASE (self-addressed stamped envelope) for RETURN BY MAIL

Name of Assessed Owner: _____

Property Location: _____

Map: _____ Block: _____ Lot: _____

Reason for Request: (Select One)

Sale Refinance Foreclosure Other: _____

Signature of Applicant: _____

FEE: \$50.00 per parcel

Please allow 10 business days for processing and provide a **self-addressed stamped envelope** if the lien certificate is to be mailed. No MLC's will be released until payment is received.