



REQUEST FOR MUNICIPAL LIEN CERTIFICATE

Request for Certificate under the General Laws of the State of Rhode Island
(§44-7-11, 1956 as amended)

Requested for: _____
(Name of Property Owner)

Property Location: _____
(Street Address)

Assessor's Plat: _____ Lot: _____ Condo: _____

Account #: _____

Fee for municipal lien certificates is \$25.00 per lot. Multiple lots may be included on one request form. Please include either necessary postage or a self-addressed stamped envelope.

Requested by: _____

Mailing Address: _____

Phone Number: _____

**Town of Smithfield, Rhode Island
Tax Collector's Office
64 Farnum Pike
Smithfield, RI 02917**