



TOWN OF BROOKLINE, MASSACHUSETTS
 ASSESSING DEPARTMENT
 333 Washington Street, Room 215
 Brookline, MA 02445

WWW.BROOKLINEMA.GOV

Abutters List Request Form

Property Address: _____
 Property Owner: _____
 Parcel Number: Block _____ Lot: _____ Sub-lot: _____
 Request made by: _____ Date: _____
 Organization: _____
 Mailing Address: _____
 Phone Number: _____
 Email Address: _____

PURPOSE: ___ Conservation Commission
 ___ Zoning Board of Appeals
 ___ Planning Board
 ___ Marijuana Establishment
 ___ Other (Board of Health, Historical Commission, Victualler's License)

Abutters and abutters to abutters within 300 feet of the subject parcel will be included on the list. If you require a different radius, please indicate here: _____ feet.

Mailing labels for all abutters will be provided using the current assessment record at a cost of \$0.05 per label. Number of label sets requested: _____.

Fees for preparing an Abutter's List are based on an hourly rate of \$30.00 per hour.

A deposit of \$10.00 is required for all requests.

Please allow 10 business days to prepare a Certified Abutter's List.

Any questions, please contact the Assessor's Office at 617-730-2060; Email
 Assessors@Brooklinema.gov.

FOR INTERNAL USE ONLY

List prepared by: _____ Date: _____ Deposit: _____
 Labels; _____ x \$0.05/label = \$ _____ Labor; _____ hours x \$30.00/hr.= \$ _____
 Total Fees; \$ _____, less Deposit \$ _____ = \$ _____ Received (date): _____

NOTES: _____