



FORM T TAX INFORMATION

Applicant should complete items 1 to 6. Please print.
This form must be signed by Tax Collector

(1) Address of Property

(2) Assessors' Map # Lot #

(3) Name of Applicant

(4) Address of Applicant

(5) Name of Owner of Property, if same as applicant write same

(6) Address of Property Owner, if same as applicant write same

I certify that the applicant listed above has No outstanding tax due the Town of Berkley for ANY property owned or jointly owned by the Applicant. I also certify that the Owner of the property listed has no outstanding tax due the Town of Berkley.

Tax Collector, Town of Berkley

Date

I certify that the Applicant, Owner and property listed above have no Tax Title liens held by the Town of Berkley.

Treasurer, Town of Berkley

Date

For Departmental Use Only