

TOWN OF HAMILTON  
BOARD OF ASSESSORS  
P.O. Box 429  
Hamilton, MA 01936  
Phone: 978-468-5574 Fax: 978-468-2682

**REQUEST FOR CERTIFICATION OF ABUTTER'S LIST**  
FEE: \$15.00

To be submitted to:

- ☐ Board of Health  
☐ Conservation Commission  
☐ Planning Board  
☐ Zoning Board of Appeals  
☐ Other \_\_\_\_\_

Type of List:

- ☐ Abutters 100'  
☐ Owners of land directly opposite on any public or private way  
☐ Owners of land within 300' of the property line

Property owner of record: \_\_\_\_\_

Address of Property: \_\_\_\_\_

Parcel ID: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Applicant's Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

CERTIFIED LIST WILL BE PROVIDED WITHIN SEVEN TO TEN WORKING  
DAYS.