



**Office of the Board of Assessors**  
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Donald W. Howes  
Chairperson  
Edward A. Holland, Jr.  
  
Lisa M. Alberto

## REQUEST FOR ABUTTER'S LIST

Today's Date: \_\_\_\_\_

Requester's Name: \_\_\_\_\_

Mailing Address of Requester: \_\_\_\_\_

Requester's Phone Number: \_\_\_\_\_

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

Subject Property Parcel ID: Map \_\_\_\_\_ Lot \_\_\_\_\_

Requester's Signature: \_\_\_\_\_

Do you wish the abutter's list to be?

Mailed to you \_\_\_\_\_ or Picked Up \_\_\_\_\_

Purpose: Building/ZBA (300' Radius)

ConCom (100' Radius)

Other (please specify)  \_\_\_\_\_

Date Received in Assessor's Office: \_\_\_\_\_

Completed By: \_\_\_\_\_

Cost: \$25.00 per report type and or per address - checks payable to Town of Hopedale

**PLEASE ALLOW TEN (10) BUSINESS DAYS FOR  
COMPLETION**