

MONTAGUE BOARD OF ASSESSORS

ONE AVENUE A, TURNERS FALLS, MA 01376 413-863-3200 x120 Ann M. Cenzano, Chairperson Ann E. Fisk Rebecca Sabelawski

Adam Tocci, Director of Assessing

REQUEST FOR ABUTTERS LIST

Name of Owner of Record:

ASSESSORS USE ONLY:	Processed Date: By:
Our office will provide a list certifying the names a the time of the last assessment for taxation made b	and addresses of abutters to the subject parcel as of y the Town of Montague.
Please forward this form to the Board of Assessors requested, the list can be emailed to you in PDF fo	. 1
Address of subject parcel:	
Parcel Id of subject parcel:	
Locus:	
churches, synagogues, hospital and public and pri	500 feet needs to be processed in order to identify all vate elementary or secondary schools, then an person whose property directly touches the proposed
□ Direct Abutter □ Conservation 100' □ Zoning	g/Planning 300' ABCC Liquor License-see below
Please specify type of request:	
reteptione two.	
Telephone No:	
Mailing Address (or email):	
Contact Person:	