

**TOWN OF RUSSELL
BOARD OF ASSESSORS
65 MAIN STREET
PO BOX 402
RUSSELL, MA 01071**

ABUTTERS LIST REQUEST

*Please allow 10 days for final list
Cost: \$15.00 Due with request form*

PARCEL REQUESTED: _____

RECORD OWNER: _____

DIRECT ABUTTERS: 300 FOOT ABUTTERS:

FOR WHICH BOARD: _____

REASON FOR REQUEST: _____

CONTACT PERSON: _____ TELEPHONE NUMBER: _____

SIGNATURE: _____ DATE: _____

WOULD YOU LIKE THIS SENT VIA EMAIL? **YES** **NO**

MY EMAIL ADDRESS: _____

WOULD YOU LIKE THIS SENT VIA REGULAR MAIL? **YES** **NO**

MY MAILING ADDRESS IS: _____