



# PROPERTY RECORD CARD REQUEST FORM

City of Boston Assessing Department

**FEE: \$5.00 per parcel** payable by cash, check or money order made payable to the **City of Boston**. \*This fee is waived if the requestor owns the property. A signature is required for an owner who seeks this waiver.

Please complete both of the following sections:

## I. Requestor Information

NAME/COMPANY NAME: \_\_\_\_\_

CHECK ONE: \_\_\_\_\_ OWNER OF PROPERTY      \_\_\_\_\_ OTHER

MAILING ADDRESS: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ (DAYTIME) PHONE NUMBER: (    ) \_\_\_\_\_ - \_\_\_\_\_

\*Owner's signature: \_\_\_\_\_

(required for waiver of fee, see above)

## II. Property Information

Please provide the following information for each property record card you are requesting:

Ward & Parcel No.	Property Address (number, street and neighborhood)	Property Type (Residential, Commercial, Industrial, or Condominium)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*Place additional requests on separate paper*

**Send completed form and payment to:** Assessing Department  
Property Record Card Request  
Room 301, 1 City Hall Square  
Boston, MA 02201

**DO NOT WRITE IN THIS SPACE (FOR OFFICE USE ONLY)**

Indicate METHOD OF PAYMENT: \_\_\_\_\_ CHECK      \_\_\_\_\_ MONEY ORDER      \_\_\_\_\_ CASH      \_\_\_\_\_ Tracking #  
MONEY ORDER/CHECK NUMBER: \_\_\_\_\_ AMOUNT: \$ \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_ ASSIGNED TO: \_\_\_\_\_  
DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ DATE PROCESSED: \_\_\_\_/\_\_\_\_/\_\_\_\_