



Liquor – Request for Abutters List

Date: _____

I request an abutter's list (Direct Abutters & any churches, synagogues, hospitals and schools located within 500ft) for the Select Board

Name of Applicant: _____

Address: _____

Telephone: _____

Location: _____

Parcel ID of Locus: _____

I understand that I am to pay a fee of \$1.50 per abutter, to the Board of Assessors, for this list.

The following items are included with this package:

Abutters Request Form
Abutters List
2 Sets of Mailing Labels