



TOWN OF BERKLEY MASSACHUSETTS

OFFICE OF THE TREASURER/COLLECTOR
www.townofberkleyma.gov

Municipal Lien Certificate Request

*Please note there is a \$50.00 fee for the MLC request.
Please allow up to ten (10) business days for processing the MLC request.*

Property Location: _____

Parcel ID: _____

Owner Name: _____

Requester: _____

Requester's Address: _____

Requester's Phone Number: _____

☐ **Please mail completed MLC**

Self-Address Stamped Envelope Required

☐ **Please call when completed for pickup**

Date Received: _____