## TOWN OF WOLFEBORO Office of the Tax Collector P. O. Box 629

Wolfeboro, NH 03894 Tel (603) 569-3902 taxcollector@wolfeboronh.us

## TAX AND OUTSTANDING ASSESSMENT REQUEST

Date of Request:						
Request for Information	ation of the Follo	owing Parcel:				
Current Owner:				Account		
Property Location:				Map	Lot	
Current Taxes, Yea	ır	1 <sup>st</sup> Half 2 <sup>nd</sup> Half		Date Paid Date Paid		
If unpaid, amounts	due thru:					
Year Tax	Int (pe	er diem)	Cost	Total		
Is the Property in Current Use? Exemptions/credits?						
Other Outstanding	Assessments					
Contact these Depa	rtments directly	for Final Bill	and exact	amounts:		
Municipal Electric: Acct #	Water and S Acct#	Sewer:				
Other:						
Additional Informa	tion Requested:					

As a Representative of the Town of Wolfeboro, I hereby certify that the above information is complete to the best of my knowledge and includes all recent taxes and assessments on the above identified property.