



**REQUEST FOR COPY OF FINAL  
REAL ESTATE BILL FORM  
CITY OF MANCHESTER, NH  
TAX COLLECTOR'S OFFICE**  
One City Hall Plaza, West Wing  
Manchester, New Hampshire 03101  
Tel: (603) 624-6575 – Fax: (603) 628-6162  
E-mail: [taxcollector@manchesternh.gov](mailto:taxcollector@manchesternh.gov)

**Instructions:** Specify your requests in the appropriate sections, and then figure your fees. Send this completed form, along with your check/money order for the total fees, to the address shown at the top of this page. You must also enclose a **self-addressed stamped, envelope.**

Your Name: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, ZIP: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

### Request For Copy Of Final REAL ESTATE Bill

**Request For Copy Of Final Bill Form:** Specify name of property owner, the account number, parcel number, location of property and any other information that you know. **The Fee is \$2.00 per copy.**

Name of Property Owner (required)	Account Number	Tax Year (s) (required)	Map Number Lot Number	Location of Property (required)

**Calculate Your Total Amount For The Fees Here:** Fill in the number requested for each type, then calculate and total your fees.

Item Type	Total Items Requested	Cost each	Fee total
Request For Copy Of Final Bill Form		X \$2.00 Per Copy	

**TOTAL FEES:** Make check/order payable to **City of Manchester, NH:**  
\*\*Please remember to enclose a **self-addressed, stamped envelope.**