



RECEIPT REQUEST 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

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: _____

Receipt Request 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 property per year.**

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
Receipt Request Form		X \$2.00 Per Property Per Tax Year	

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