



**TAX LIEN RELEASE
 INFORMATION 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: _____

For a copy of your Release of Lien: Please specify the name of property owner at time of lien, the amount of the lien in question, the property location, and the tax year(s) in question. **The Fee is \$10.00 per property for research plus \$2.00 for each receipt.**

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

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
For a copy of your Release of Lien		X \$10.00 per property for research +\$2.00 for each receipt	

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