



# Town of Ellendale

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## Request for Lien Certificate Letter

To receive a Lien Certificate Letter, fill out this form 10 days prior to closing.

### Closing Attorney Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Please check box:

☐ Send by Fax

☐ Send by E-mail

E-Mail Address: \_\_\_\_\_

### Property Information:

Name of Seller: \_\_\_\_\_

Name of Buyer: \_\_\_\_\_

Property Address: \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_

Closing Date: \_\_\_\_\_