



Town of Ellendale

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: _____

Buyer Email Address: _____

Property Address: _____

Tax Parcel Number: _____

Closing Date: _____