

****PLEASE USE WHEN REQUESTING A MUNICIPAL LIEN
CERTIFICATE IN THE TOWN OF COVENTRY****

TOWN OF COVENTRY

REAL ESTATE TITLE CERTIFICATION REQUEST

UNDER 44-7-11 OF THE

GENERAL LAWS OF RHODE ISLAND

PLAT _____ LOT _____ CONDO# _____

ADDRESS _____

**THIS PROPERTY: (check applicable choice, MUST choose one)
(If this section is not completed, MLC request will be returned to you for
disclosure)**

Property is in foreclosure or has been foreclosed on.

Property is being refinanced.

Property is a sale.

Municipal Lien Certificate requested by:

Name of Company (or Individual): _____

Address: _____

City/State/Zip: _____

*****IF THE MLC IS TO BE MAILED TO YOU, PLEASE INCLUDE A SASE**.
IF ONE IS NOT INCLUDED THE MLC WILL BE HELD IN OUR OFFICE FOR
PICK UP.*****

****SASE-Self Addressed stamped envelope. Meaning: YOU FILL OUT THE
ENVELOPE.**