

**Commonwealth of Massachusetts
TOWN OF BRIDGEWATER * ASSESSOR'S OFFICE**

Pymt. _____

Amt. _____

Date: _____

Application for Abutter's List

****Please Allow ten business days for completion of your Abutter's Listing Request.**

Petitioner: _____

Telephone: _____

Address: _____

Date: _____

Owner of _____

Petitioned Site:

Record: _____

Location: _____

Assessors Map:_____ Parcel_____

Map:_____ Parcel_____

Map:_____ Parcel_____

Agency: _____

(Board/Commission i.e: Planning, Conservation, Selectmen, Zoning etc...)

Abutter's to Petitioned Site(s) identified by Assessors Map and Parcel numbers are listed below:

	MAP	PAR	KEY		MAP	PAR	KEY		MAP	PAR	KEY
1	_____ / _____	_____ / _____	_____ / _____	18	_____ / _____	_____ / _____	_____ / _____	35	_____ / _____	_____ / _____	_____ / _____
2	_____ / _____	_____ / _____	_____ / _____	19	_____ / _____	_____ / _____	_____ / _____	36	_____ / _____	_____ / _____	_____ / _____
3	_____ / _____	_____ / _____	_____ / _____	20	_____ / _____	_____ / _____	_____ / _____	37	_____ / _____	_____ / _____	_____ / _____
4	_____ / _____	_____ / _____	_____ / _____	21	_____ / _____	_____ / _____	_____ / _____	38	_____ / _____	_____ / _____	_____ / _____
5	_____ / _____	_____ / _____	_____ / _____	22	_____ / _____	_____ / _____	_____ / _____	39	_____ / _____	_____ / _____	_____ / _____
6	_____ / _____	_____ / _____	_____ / _____	23	_____ / _____	_____ / _____	_____ / _____	40	_____ / _____	_____ / _____	_____ / _____
7	_____ / _____	_____ / _____	_____ / _____	24	_____ / _____	_____ / _____	_____ / _____	41	_____ / _____	_____ / _____	_____ / _____
8	_____ / _____	_____ / _____	_____ / _____	25	_____ / _____	_____ / _____	_____ / _____	42	_____ / _____	_____ / _____	_____ / _____
9	_____ / _____	_____ / _____	_____ / _____	26	_____ / _____	_____ / _____	_____ / _____	43	_____ / _____	_____ / _____	_____ / _____
10	_____ / _____	_____ / _____	_____ / _____	27	_____ / _____	_____ / _____	_____ / _____	44	_____ / _____	_____ / _____	_____ / _____
11	_____ / _____	_____ / _____	_____ / _____	28	_____ / _____	_____ / _____	_____ / _____	45	_____ / _____	_____ / _____	_____ / _____
12	_____ / _____	_____ / _____	_____ / _____	29	_____ / _____	_____ / _____	_____ / _____	46	_____ / _____	_____ / _____	_____ / _____
13	_____ / _____	_____ / _____	_____ / _____	30	_____ / _____	_____ / _____	_____ / _____	47	_____ / _____	_____ / _____	_____ / _____
14	_____ / _____	_____ / _____	_____ / _____	31	_____ / _____	_____ / _____	_____ / _____	48	_____ / _____	_____ / _____	_____ / _____
15	_____ / _____	_____ / _____	_____ / _____	32	_____ / _____	_____ / _____	_____ / _____	49	_____ / _____	_____ / _____	_____ / _____
16	_____ / _____	_____ / _____	_____ / _____	33	_____ / _____	_____ / _____	_____ / _____	50	_____ / _____	_____ / _____	_____ / _____
17	_____ / _____	_____ / _____	_____ / _____	34	_____ / _____	_____ / _____	_____ / _____	51	_____ / _____	_____ / _____	_____ / _____