TOWN OF HOPKINTON

TRANSFER OF OWNERSHIP FORM

To whom it may concern,

At the time of real estate closing (sales only), please complete and return this form with new and correct mailing address of both the Seller and Buyer.

ACCOUNT #:
PARCEL ID:
PLAT: LOT:
LOCATION:
SELLER'S FORWARDING ADDRESS: EMAIL ADDRESS: TELEPHONE NUMBER
Name:
Street:
Town, State, Zip Code
BUYER'S MAILING ADDRESS: EMAIL ADDRESS: TELEPHONE NUMBER
Name:
Street:
Town, State, Zip Code:

Mary Lynn Caswell
Office of Tax Collector
P.O. Box 154, Hopkinton, Rhode Island, 02833
Telephone - (401) 377-7781
Email - marylynn@hopkintonri.org