



Property Affidavit

For any additional properties that do not fit on this form, attach a spreadsheet. (Do not use another affidavit. Only one should be submitted.)

Please list addresses of Boston Properties Owned		PARCEL ID #
Boston Properties Previously Foreclosed Upon by COB:		PARCEL ID #
Are you including any additional properties on an attached spreadsheet?		
☐ YES ☐ NO		

Date _____

Notes: _____

Public Works Department

Y \$ N ☐

Signature & Date:

Notes:

Treasury Department

Y \$ N ☐

Signature & Date:

Notes:

Boston Water & Sewer Commission

Y \$ N ☐

Signature & Date:

Notes: