



Town of Seekonk
Office of the Treasurer/Collector
"Certificate of Good Standing"
Zoning Department

Permit Type: _____

_____ Petitioner Name

_____ Property Owner

_____ Petitioner Address

_____ Property Address

_____ City, State Zip

_____ City, State Zip

_____ Petitioner Phone Number

_____ Plat Number _____ Lot Number(s)

The Applicant must submit this form to the Tax Collector's Office. This completed and signed "Certificate of Good Standing" must also be submitted with your application . Delinquent bills must be paid in full before any application will be accepted. If applicable, a tax statement is attached itemizing all past due amounts. This certificate is valid for 30 days from date signed below.

- Applicant is in Good Standing with the Town of Seekonk.
- Applicant is not in Good Standing with the Town of Seekonk.

Collector comments (if necessary): _____

Christine N. DeFontes

Date

Collector of Taxes

Collector's Office: (508) 336-2930

Office Hours: Monday, Tuesday, Thursday 8:30 AM to 4:30 PM Wednesday 8:30 AM to 5:30 PM,
Friday 8:30 AM to Noon