



**MASSACHUSETTS  
TRIAL COURT**

**TAX LIEN COMPLAINT  
TO FORECLOSE RIGHTS OF REDEMPTION  
(G.L. c. 60, § 65)**

COURT USE ONLY

COURT DEPARTMENT

LAND COURT

COUNTY

DOCKET NUMBER

CASE NAME

v.

**Statutory Elements and Request for Relief**

1. The real estate described on page 2 of this Complaint:

was taken or sold on \_\_\_\_\_ by Taking or Collector's Sale for nonpayment of taxes

was taken or sold on \_\_\_\_\_ by Taking or Collector's Sale for nonpayment of sewer or water charges pursuant to G.L. c. 40N, § 9(d)

is the subject of a Tax Deferral and Recovery Agreement entered into on \_\_\_\_\_ pursuant to G.L. c. 59, § 5, cl. 18A or cl. 41A

by \_\_\_\_\_ of \_\_\_\_\_

in \_\_\_\_\_ County by instrument executed on \_\_\_\_\_ and

recorded on \_\_\_\_\_ in Book \_\_\_\_\_, Page \_\_\_\_\_.

registered on \_\_\_\_\_ as Doc. No. \_\_\_\_\_, Cert. No. \_\_\_\_\_.

2. No redemption has been made and

more than two years (if before November 24, 1971) or more than six months (if between November 24, 1971 and October 31, 2024) or more than 12 months (if on or after November 1, 2024), has passed from the taking or sale date, or the death of the person whose taxes have been deferred.

the buildings on the land have been found to be "abandoned property" as stated in the recorded or registered affidavit of the local building inspector pursuant to G.L. c. 60, § 81A. **[Attach the recorded or registered affidavit to this Complaint.]**

the redemption amount exceeds the assessed value of the parcel as stated in the recorded or registered affidavit of the local treasurer pursuant to G.L. c. 60, § 81B. **[Attach the recorded or registered affidavit to this Complaint.]**

the property's record owner(s) consents to this action pursuant to G.L. c. 60, § 65. **[Attach proof of written consent to this Complaint.]**

3. The instrument was recorded within 30 days (if before July 12, 1933) or within 60 days (if on or after July 12, 1933) of the taking or sale date, or promptly after execution of the Statement of Entry into Tax Deferral and Recovery Agreement.

4. The assessed value of the real estate is \$ \_\_\_\_\_. Assessor's Map \_\_\_\_\_ Parcel No. \_\_\_\_\_.

5. Plaintiff(s) requests that the Court enter judgment: foreclosing all rights of all persons entitled to redeem; declaring that title to the described real estate is absolute and that all rights of redemption are barred; preserving the right of the owner of the real estate at the time of foreclosure, and of those holding an interest in the real estate at the time of foreclosure and their heirs, successors, and assigns, to receive any excess equity and subject to the requirements of G.L. c. 60, § 64A; and granting such other and further relief as the Court deems proper.



**Description of Real Estate**

*Check this box only if applicable. (Applies only to municipal Plaintiffs.)*

This Complaint contains more than one parcel of real estate held in the same record ownership.

[ATTACH PAGES 1 AND 2 OF THIS COMPLAINT WITH APPLICABLE INFORMATION COMPLETED FOR EACH PARCEL. A MAXIMUM OF 5 PARCELS MAY BE INCLUDED.]

The real estate parcel is located in \_\_\_\_\_ in \_\_\_\_\_ County, with an address of \_\_\_\_\_,

and is described as: [DESCRIPTION MUST BE SAME AS IN INSTRUMENT IDENTIFIED ABOVE. ATTACH ADDEDNDUM IF NECESSARY.]

**Assignment Information  
(Complete this section only if applicable)**

The tax title, tax receivable, or other instrument was conveyed or assigned to Plaintiff(s) as follows:



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**Listing of All Known Parties with an Equity Ownership Interest (Required)  
(Attach an addendum with additional parties if necessary)**

NAME	ADDRESS	NATURE OF INTEREST
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**Listing of Other Interested Parties Known to the Plaintiff  
(Attach an addendum with additional parties if necessary)**

NAME	ADDRESS	NATURE OF INTEREST
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**Notice of this Complaint must be recorded or registered in the local Registry of Deeds or Registration District, with a recorded or registered copy filed with the Land Court promptly.**

NAME (FIRST, MIDDLE, LAST)				B.B.O. NUMBER (IF APPLICABLE)	
FIRM OR AGENCY NAME (IF APPLICABLE)				OFFICE OR HOME PHONE NUMBER	
STREET ADDRESS			APT/UNIT #	MOBILE PHONE NUMBER	
CITY/TOWN		STATE	ZIP CODE	E-MAIL ADDRESS	
DATED		SIGNED UNDER PENALTY OF PERJURY			
		<b>X</b>			