

	MASSACHUSETTS TRIAL COURT	TAX LIEN MOTION AND REQUEST FOR HEARING		COURT USE ONLY	
COURT DEPARTMENT LAND COURT		COUNTY		DOCKET NUMBER	
CASE NAME					
<p>I request that the Land Court schedule a hearing to consider the following motion(s):</p> <p><input type="checkbox"/> Motion for entry of finding to set the terms required for redemption (payment of what is owed).</p> <p><input type="checkbox"/> Motion for payment of Plaintiff's legal fees of \$_____ (requested amount). This motion must be supported by an affidavit of Plaintiff's counsel that includes or attaches detailed, contemporaneous attorney time records identifying, at a minimum, the date, description of legal task, time spent, hourly rate charged, and amount billed.</p> <p><input type="checkbox"/> Motion for judgment of foreclosure (after finding has expired).</p> <p><input type="checkbox"/> Motion to vacate judgment (Attach supporting memorandum of law to this form).</p> <p><input type="checkbox"/> Other motion: _____ (Specify and attach the motion with supporting memorandum of law to this form).</p>					
NAME (ATTORNEY OR PARTY(S))				B.B.O. NUMBER (IF APPLICABLE)	
FIRM OR AGENCY NAME (IF APPLICABLE)				OFFICE OR HOME PHONE NUMBER	
STREET ADDRESS			APT/UNIT #	CELL PHONE NUMBER	
CITY/TOWN	STATE	ZIP CODE	E-MAIL ADDRESS		
DATE		SIGNATURE			



MASSACHUSETTS
TRIAL COURT

**TAX LIEN MOTION AND
REQUEST FOR HEARING**

COURT USE ONLY

COURT DEPARTMENT

LAND COURT

COUNTY

DOCKET NUMBER

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CERTIFICATE OF SERVICE

I hereby certify that I have served the attached Tax Lien Motion and Request for Hearing by

- first class mail, postage prepaid and/or
- e-mail, to the following person(s) and address(es):

(Enter name, address, and/or e-mail address below for each person served.)

DATE

SIGNATURE