

Town of Southington

Land Record Copy Request Form

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Special Instructions/Additional Request Information (Optional):

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Fee: \$1.00 per page Total Number of Pages Requested _____ Date: ____/____/____

*(Checks may be made payable to **Town of Southington.**)*

MAIL TO: Town Clerk, P. O. Box 152, Southington, CT 06489
Please include a stamped, self-addressed envelope along with payment.

-OR-

FAX TO: Town Clerk's Office, (860) 276-6229
Payment must be mailed in or submitted online via credit card at
www.southington.org (an additional convenience charge applies to online
payments.)