



TOWN OF OCEAN ISLE BEACH

3 WEST THIRD STREET
OCEAN ISLE BEACH, NC 28469
TELEPHONE (910) 579-2166
FAX (910) 579-8804

TO: TAX COLLECTOR

DATE: _____

FROM: _____

CONTACT: _____

PHONE: _____

FAX: _____

TAX CERTIFICATION

PARCEL NUMBER _____

LEGAL DESCRIPTION _____

PROPERTY ADDRESS _____

CURRENT OWNERS _____

NEW OWNERS _____

NEW OWNERS ADDRESS _____

TELEPHONE NUMBER(S) _____

CLOSING DATE _____

Was this house constructed prior to 1992? YES / NO _____

Sewer connection certified _____

(PLEASE ALLOW UP TO 48 HOURS FOR COMPLETION OF FORM)

TAXES AND ASSESSMENTS

(FOR PARCELS LOCATED ON CANALS - THE CANAL ASSESSMENTS ARE INCLUDED IN THE TAX AMOUNT DUE EACH YEAR)

YEAR	AMOUNT	WATER\SEWER BILL	\$ _____
_____	\$ _____	METER DEPOSIT	\$ _____
_____	\$ _____	**If new owner please advise them that they <u>MUST</u> complete an application for utility service. Also service will be disconnected on closing date if deposit has not been paid. **	
_____	\$ _____		

TAX AMOUNT TO BE COLLECTED \$ _____

WATER\SEWER, DEPOSIT TO BE COLLECTED \$ _____

PLEASE WRITE SEPARATE CHECKS AND MAIL BOTH TO: TOWN OF OCEAN ISLE BEACH 3 WEST THIRD ST. OCEAN ISLE BEACH, NC 28469

COMPLETED BY: _____ DATE: _____