



Form M-792 Certificate Releasing Massachusetts Estate Tax Lien

Rev. 2/98

**Massachusetts
Department of
Revenue**

Bureau of Desk Audit, Estate Tax Unit PO Box 7023, Boston, MA 02204

File in triplicate with copy of recorded deed.

Mail to: Name ▶ □ Street address City/Town, State, Zip code □	Decedent's first name and initial	Last name
	Probate court	Date of death
	Docket number	
	Residence (domicile) at time of death	

This certificate releases the lien of the Commonwealth of Massachusetts imposed by Chapter 65C of the General Laws, on any and all interests which the decedent may have had in the property described below:

Real Estate (full legal description not necessary)

Location of property _____
Number Street City/town Zip code

As described by deed dated _____ and recorded in
 _____ Book No. _____ Page No. _____, or
Registry of Deeds

As described by certificate of title no. _____ recorded in

Registered land section for _____ County.

COMMISSIONER OF REVENUE

By: _____
Chief, Bureau of Desk Audit