

Bustins Island Village Corporation
Trust Information for Voting Eligibility

Exact Name of Trust _____

Lot Section and
Number(s) _____

Trustees Names and Address

I/We acknowledge that it is the obligation of the Trustees to inform the BIVC through its Clerk of any change to the ownership of the lots or the Trustees under the Trust.

Trustee filling out this form: _____
Please print

Signature _____ Date _____

Return to Clerk, BIVC, PO Box 22, South Freeport, ME 04078

