COLLIN COUNTY UNCLAIMED PROPERTY

CLEAR FORM | PRINT FORM

GENERAL CLAIM REQUEST FORM

(Form Used To Request Payment By Person Other Than Original Owner)

Collin County Auditor's Office
Unclaimed Property Division
Claims Section
2300 Bloomdale Road Suite 3100
McKinney, TX 75071

ORIGINAL OWNER INFORMATION

Holder name | Tax ID number

Mailing address

City | State | ZIP code

E-mail address | Phone number *(Area code and number)*

( )

Claim Amount

Description

CLAIMANT INFORMATION

Claimant name | Phone number *(Area code and number)*

( )

Mailing address

Relationship | Relationship

Please provide proof of ownership for each claim. A separate Claim Form is required for each claim.

INDEMNIFICATION AND AFFIDAVIT OF ORIGINAL OWNER

Upon payment by the Collin County Auditor's Office of the claim described above, (Print Your Name)
agrees to indemnify and hold harmless Collin County, its employees and agents from all losses, suits, actions or claims arising from or related to any other party who hereafter asserts or attempts to establish a right to payment of the above described funds.

COUNTY AUDITOR AND COLLIN COUNTY INDEMNIFICATION IS EFFECTIVE WHEN SIGNED.

Signature _____ Title _____ Date _____

If you have any questions regarding Unclaimed Property, you may call (972) 548-4731.
Our FAX number is (972) 548-4696; metro number is (972) 424-1460.

Under Ch. 559, Government Code, you are entitled to review, request and correct information we have on file about you, with limited exceptions in accordance with Ch. 552, Government Code. To request information for review or to request error correction, contact us at the address or phone number listed on this form.