



Unclaimed Property Claim Form

Attach the following Information:

- (A) Proof of claimant's social security number
- (B) Copy of claimant's Driver's License or other official form used for identification
- (C) List all addresses of the owner associated with the property being claimed, including P.O. Boxes

Claimant Information:

Name: _____ SSN: _____

Co-Owner Name (if any): _____ SSN: _____

Current Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Filing Status: Check one box below and attach the documents requested.

____ If you are an OFFICER OF THE ORGANIZATION, send current documents establishing your authority to act for the organization.

____ If you are a TRUSTEE or GUARDIAN to the owner, send copies or current documents establishing trust or guardianship.

____ If you are an HEIR to the owner, send a copy of the probated will OR court order OR affidavit of heirship, listing heirs and current addresses AND a copy of the death certificate of the owner.

____ If you are an EXECUTOR or ADMINISTRATOR for the owner's estate, send a copy of the death certificate AND Letters of Administration dated within 90 days of filing claim.

Deceased SSN: _____ Estate/Trust/Company TPID: _____

Owner Property Information:

Owner Name: _____ Property Amount: _____

UTAR Account No.: _____ Last Active Date: _____

UTAR Account Address: _____

Failure to provide your **IDENTIFICATION, SIGNATURE** and **COMPLETED CLAIM FORM** will result in the form being returned to you.

You must be 18 or older to claim property.

Claimant Signature

I hereby certify that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim, said Claimant will indemnify and hold harmless the City of Granbury and its officers and employees from any damages, claims or losses of any kind resulting from the payment of the above property to Claimant.

Claimant Signature: _____ Date: _____

Co-Owner (if any): _____ Date: _____