

Finance Department
City of Harker Heights
**Unclaimed Property Claim Form
For Heir, Trustee**

Mail Completed Form to:
**City of Harker Heights Finance Dept.
Attention: Kelsey Coffman
305 Miller's Crossing
Harker Heights, TX 76548**

Claimant is required to provide the city with sufficient documentation to establish Claimant's right to receive unclaimed property. Submitting your Social Security Number ("SSN") is optional but may be the only means of verifying your claim. To the extent permitted by law, your Social Security Number will be kept confidential.

Claimant Information

Business Name: _____ TIN#: _____
Name: _____ Title: _____
Address: _____ Daytime Phone: _____
City: _____ State: _____ Zip Code: _____
Fax Number: _____ E-mail Address: _____

Please attach the following information:

1. Copy of your Driver's License or other official form used for identification.
2. Proof of your Social Security No. (Not required, but may help verify ownership).
3. Proof of the reported owner's identification.
4. Proof the reported owner's Social Security No. (Not required, but may help verify ownership).
5. Proof associating the reported owner with the address associated with the fund. Photocopies of the following are acceptable: utility bill, mortgage payment coupon, post-marked envelope, driver's license, cancelled check, birth certificate, report card, credit report or pay stub that reflects the address.

Filing Status:

Check one, attach documents requested AND enter the applicable federal number below:

_____ If you are an Heir to the reported property owner, attach a certified copy of the death certificate and a copy of the probated will, court order, or affidavit of heirship.

_____ If you are a trustee or Guardian to the reported property owner, attach a copy of the trust agreement or current guardianship documents.

_____ If you are an Executor or Administrator for the reported property owner's estate, attach a certified copy of the death certificate, and letters of Administration or Testamentary dated within 90 days of filing the claim.

_____ If you are an Agent of the reported property owner, attach a copy of your Power of Attorney, and current contact information where a City employee can contact the owner.

Fill in the Federal Tax Identification Number that applies:

Reported Property's Social Security No.: _____

Estate or Trust FEI: _____

Claimant Certification and Signature

The named Claimant certifies 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, Claimant will indemnify and hold harmless the City of Harker Heights, the Director of Finance, and its employees from any damages, claims, or losses of any kind resulting from the payment of the above property to the Claimant.

WARNING: Pursuant to Texas Penal Code §37.01, a person commits an offense if he makes, presents, or uses a governmental record with knowledge of its falsity. An offense under this section is a Class A misdemeanor, unless the actor's intent is to defraud or harm another, in which event the offense is a state jail felony.

Signature: _____ Date: _____