

CLAIMANT:
NAME OF PAYEE:

MAIL ADDRESS:

TREASURER-TAX COLLECTOR COUNTY OF SAN DIEGO

COUNTY ADMINISTRATION CENTER • 1600 PACIFIC HIGHWAY, ROOM 162 SAN DIEGO, CALIFORNIA 92101-2477 • 1-877-829-4732 • FAX (619) 595-4626 Web site: http://www.sdtreastax.com



DAN McALLISTER Treasurer-Tax Collector

UNCLAIMED PROPERTY TAX REFUND CLAIM FORM

Please complete this claim form if you have made an overpayment of property taxes and wish to claim a refund. The claim form and documentation supporting your claim must be returned to the County Tax Collector's office prior to the deadline appearing on the Refund Notice. Refund claims will be verified and, if valid and timely received, will, generally, be issued within 4 to 6 weeks after receipt of the claim. Mail completed claim form to: San Diego County Treasurer-Tax Collector, ATTN: Financial Division / Property Tax Refund Claim, 1600 Pacific Highway, Room 162, San Diego, CA 92101.

PARCEL/BILL NUMBER:

		SS:	
<u>GROUNDS UPON WHICH T</u>	THE CLAIM IS BASED:		
I am Claiming the refund based on	my standing as the (please check	cone):	
Property Owner	Property Owner Mortgage Company Other (explain):		
to support their standing as the pa	arty entitled to claim the refund. It Claim Signing Instructions f	led to claim the refund. The claimant must provide documentation Failure to provide the required documentation may result in the for information on who can sign the claim form, documentation will be issued.	
number. I certify (or declare) und	tt I am the rightful claimant to the er penalty of perjury that the for	e overpayment of taxes made on the above-referenced parcel or bill egoing is true and correct. I agree to indemnify and hold harmless oss resulting from the payment of this claim.	
SIGNATURE OF CLAIMANT	DATE	CITY OR TOWN WHERE SIGNED	
PRINT NAME OF CLAIMANT		TITLE & COMPANY (IF APPLICABLE)	
A notary public or other officer verifies only the identity of the document to which this certificatruthfulness, accuracy, or validities.	completing this certificate individual who signed the ate is attached, and not the	NATURE(S) MUST BE NOTARIZED. (Notary Public Seal)	

CLAIM SIGNING INSTRUCTIONS

WHO IS AUTHORIZED TO SIGN THE CLAIM FORM GUIDELINES

If the payee is a	Who is authorized to sign the Claim	Required Minimum Documentation
Individuals	The payee named on the refund must sign the Claim. If there are multiple payees, then each payee named must sign the Claim.	Copy of current government-issued photo identification (e.g. Driver's license).
Corporation	The Claim must be signed by an authorized officer of the Corporation	Copy of the current Statement of Information for the Organization filed with the Secretary of State.
		Resolution evidencing authority has been given to the named person(s) to act on behalf of the Organization to claim refunds.
		Copy of signor's current government-issued
Limited Liability Company	The Claim must be signed by an authorized officer of the LLC	photo identification (e.g. Driver's license). Copy of the current <i>Statement of Information</i> for the Organization filed with the Secretary of State.
		Resolution evidencing authority has been given to the named person(s) to act on behalf of the Organization to claim refunds.
		Copy of signor's current government-issued photo identification (e.g. Driver's license).
Partnership	For General Partnerships or Limited Partnerships, the claim must be signed by a General Partner of the organization.	Copy of the current Statement of Information for the Partnership filed with the Secretary of State.
		Resolution evidencing authority has been given to the named person(s) to act on behalf of the Organization to claim refunds.
		Copy of signor's current government-issued photo identification (e.g. Driver's license).
Trust	The Claim must be signed by each Trustee of the Trust	Copy of the Trust document stating the name of the trust and name(s) of each trustee.
		Copy of current government-issued photo identification (e.g. Driver's License off the individual filing the claim.
Sole Proprietorship	The Claim must be signed by the owner of the business.	Copy of the current Business License. Copy of signor's current government-issued
Covernment Agency	The Claim must be signed by an officer of	photo identification (e.g. Driver's license).
Government Agency	The Claim must be signed by an officer of the Agency.	A business card evidencing the signor's position and contact information within the Agency.
Estate / Deceased Payee	The Claim must be signed by the Administrator or Executor of the Estate.	Copy of the Letters of Administration filed and approved by the Probate Court.
		Copy of Death Certificate
		Copy of signor's current government-issued photo identification (e.g. Driver's license).

REQUIRED SUPPLEMENTAL DOCUMENTATION

Additional documentation may be required before the Claim is processed and the refund issued.

PROOF OF ACQUISITION OR MERGER

If the refund is payable to an organization or agency that has been acquired by, or merged with, another company, the acquiring company must provide legal evidence of such acquisition or merger.

Proof may also be required to show that the acquiring company has legal right and interest in the property or property tax payment creating the refund.

UNPROBATED AND INTESTATE ESTATES OF DECEASED PERSONS

If the refund is payable to a deceased person who did not have a will or whose estate has not been probated, the required documentation will include the name(s) and contact information of all heirs, copies of birth, marriage, and death certificates. An Affidavit may also be required attesting to the facts of the decedent's estate.

HEIR, ASSET FINDERS AND OTHERS ACTING AS AGENT FOR THE PAYEE

A payee may, but is not required, to utilize a third-party (such as an asset recovery or heir finder company) to file a Claim for refund.

If a payee elects to utilize a third-party agent to file a Claim for refund the following documentation is required:

- 1. A notarized Specific Power of Attorney disclosing the amount of the refund and authorizing the third-party to file a Claim with San Diego County.
- 2. A copy of the Agreement between the third-party and the payee.
- 3. The documentation required for the payee (see Chart) to evidence the identity of the party making the Agreement and granting authority to the third party is the party entitled to the refund.

CLAIM SUBMISSION AND REVIEW

The completed Claim(s), required identification of parties, and other required supporting documentation should be mailed or delivered to:

SAN DIEGO COUNTY TREASURER-TAX COLLECTOR ATTN: FINANCIAL DIVISION / PROPERTY TAX REFUND CLAIM 1600 Pacific Highway, Room 162 San Diego, CA 92101

WHEN WILL THE REFUND BE ISSUED?

Refunds will be issued after the Claim filing deadline has passed to allow all claimants the opportunity to file a Claim.

Refunds will be issued to the party shown as the payee on the Refund Notice and Unclaimed Refunds List that either held an ownership interest in the property or was the party who made the payment that created the refund.

QUESTIONS?

Please visit our website at www.sdtreastax.com/content/ttc/en/tax-collection/property-tax-refunds.html for a list of unclaimed refunds, general information, and Frequently Asked Questions. If you have any questions regarding the submission of an Unclaimed Property Tax Refund Form, call (619) 531-5813 for further assistance.