



TREASURER-TAX COLLECTOR SAN DIEGO COUNTY

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Dan McAllister
Treasurer-Tax Collector



UNCLAIMED PROPERTY TAX REFUND CLAIM FORM

If you have made an overpayment of property taxes and wish to claim a refund, please complete this claim form and return it to the County Tax Collector's office at the address below. Refund claims will be verified and, if valid, refunds are generally issued within 4 to 6 weeks after receipt of the claim.

NAME: _____

PARCEL/BILL NUMBER: _____

MAIL TO ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER: _____ EMAIL ADDRESS: _____

GROUND(S) UPON WHICH THE CLAIM IS BASED:

Please state the grounds upon which you are claiming the refund and attach all required identification and supporting documentation to your claim. Please refer to the attached instructions for further details. Failure to provide the required documents may result in the claim being denied and returned to the sender. As a result, claimants are requested to provide as much information as possible in order to expedite our review process and to substantiate the claimant's right to the unclaimed refund.

I state that I am the rightful claimant to the overpayment of taxes made on the above-referenced parcel/bill number. I certify (or declare) under penalty of perjury that the foregoing is true and correct. Furthermore, I agree to indemnify and hold harmless the County of San Diego, its officers, and its employees from any loss resulting from the payment of this claim.

NOTE: YOUR SIGNATURE(S) MUST BE NOTARIZED IF THE REFUND IS OVER \$500.

Signature of Claimant

Date

At (City or Town)

Printed Name

Title & Company (if applicable)

<p>A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that</p>	<p>(Seal)</p>
<p>State of California County of _____</p>	
<p>Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20____, by _____, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.</p>	
<p>_____ Signature</p>	

Claim Instructions and Information

I. GUIDELINES OUTLINING WHO IS AUTHORIZED TO SIGN THE CLAIM FORM

- A. Individual. If the payee named on the refund is an individual, that person must sign the claim form. If there are multiple payees listed on the refund, then each must sign the claim form.
- B. Corporation. If the refund is payable to a corporation (including Non-Profit Corporate structures), the claim form must be signed by an officer of the corporation.
- C. Partnership. If the refund is payable to either a General Partnership or a Limited Partnership, then the claim form must be signed by a General Partner of the organization. A Limited Partner is approved to sign the claim form only if this person has been specifically authorized by the partnership to participate in the control and management of the business.
- D. Limited Liability Company. If the refund is payable to a Limited Liability Company, the claim form must be signed by a Managing Member of the organization. A Manager is approved to sign the claim form only if this person has been specifically authorized by the membership to participate in the control and management of the business.
- E. Sole Proprietorship. If the refund is payable to a Sole Proprietorship, the claim form must be signed by the owner of the business.
- F. Government Agency. If the refund is payable to a Government Agency, the claim form must be signed by an officer of the agency.
- G. Trust. If the refund is payable to a Trust, the claim form must be signed by each individual who has been appointed as a trustee. Required supporting documentation includes a copy of the Trust Agreement that gives the names of each trustee.
- H. Estate/Deceased Payee. If the refund is payable to a deceased individual or to the estate of a deceased person, the claim form must be signed by either the executor or the administrator of the estate. Required supporting documentation includes a copy of the Death Certificate and evidence of appointment as executor or administrator.

2. REQUIRED IDENTIFICATION

Individuals:

Copy of current photo identification (i.e. current driver's license).

Businesses:

Copy of current photo identification for the authorized officer or official claiming on behalf of the company on official letterhead and a current business card.

Heir or Asset Finders:

A notarized Power of Attorney signed by the same person who signed the claim form(s). In addition, a copy of the agreement between the Asset Finder and claimant is required.

3. REQUIRED SUPPLEMENTAL DOCUMENTATION

A. PROOF OF OFFICER'S TITLE

If the refund is payable to an organization, rather than an individual, evidence to substantiate the signor's position within the organization must be provided. Examples of such evidence include the following: a business card displaying the officer's title, a partnership agreement, articles of organization, etc.

B. PROOF OF ACQUISITION (OR MERGER)

If the refund is payable to a company that has since been acquired by (or merged with) another company, the acquiring company must provide legal evidence of such acquisition (or merger).

C. POWER OF ATTORNEY

If the payee utilizes a third-party agent (such as an asset recovery company) to file a claim, a notarized Power of Attorney must be submitted to the County and signed by the same person who signed the claim form(s).

4. CLAIM FORM SUBMISSION AND REVIEW

The completed claim form(s), required identification and supplemental information should be mailed or delivered to:

Dan McAllister
San Diego County Treasurer-Tax Collector
ATTN: Financial Division / Property Tax Refund Claim
1600 Pacific Highway, Room 162
San Diego, CA 92101

QUESTIONS

If you have any questions regarding a claim or the submission of an Unclaimed Property Tax Refund Claim Form, please call (619) 531-5813 for further assistance.