



Statement of Claim for Surplus Proceeds from Tax-Forfeited Land Sale

You are receiving this form pursuant to Minnesota Statute 282.005, subdivision 6.

PROPERTY INFORMATION

Parcel ID: _____

Property Address: _____

Legal Description: _____

CLAIMANT INFORMATION

Claimant's Name: _____

Address: _____

Phone Number: _____

Email Address: _____

I make this claim as:

A former Owner of the Property. (If available, include a copy of the deed or other evidence of prior ownership with this Statement Claim.)

A party with a lien interest in the Property. (If available, include a copy of the lien interest showing the original of the lien and proof of the current amount due with this Statement of Claim.)

Other. (Include a detailed description of your interest in the real estate and documentation with this Statement of Claim.)

I make a claim for the following amount of surplus proceeds: \$ _____

Claimant: I declare that the information on this Statement of Claim any documentation is correct and complete to the best of my knowledge and belief.

Claimant Signature: _____ Date: _____

Authority, if not signed by an individual claimant: _____

Making false claims is against the law. Minnesota Statutes, section 609.465, states that anyone presenting a claim, with knowledge that it is false in whole or in part, for payment to public officer or body authorized to make such payment is guilty of an attempt to commit theft of public funds and may be sentenced accordingly.

Please return this Claim Form and Any Documentation to:

Olmsted County PRL
Attn: Revenue Department
151 4th St SE
Rochester, MN 55904