



**CITY OF BUFFALO**

**Jerrod Jones, Mayor**  
812 N Buffalo Ave  
Buffalo, Texas 75831

Approved: _____ Disapproved: _____	Original Ck#: _____
Reason for Disapproval: _____	New Ck#: _____
_____	Amount: _____
Reviewed and Approved by: _____ and _____ Date: _____	

**Unclaimed Property Claim Form**  
for use by Heir, Trustee, or Parent

**Instructions**

Claimant is required to provide the City of Buffalo with sufficient documentation to establish Claimant’s right to receive unclaimed property. All information received is considered confidential as to the extent permitted by law. *Failure to provide your identification, signature or completion of the claim form could result in the return of the form to you or denial of claim until such time as the form is completed.*

**Claimant Information**

Name: _____	Driver’s License #: _____
Address: _____	Email Address: _____
_____	Date of Birth: _____
Primary Phone #: _____	Claim Amount: _____

**Please attach the following:**

- 1) Copy of Driver’s License or other government issued photo identification.**
- 2) Proof of relationship to person having unclaimed property.**

**Filing Status**

\_\_\_\_\_ 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.

\_\_\_\_\_ Trustee or Guardian to the reported property owner: Attach a copy of the trust agreement or current guardianship documents.

\_\_\_\_\_ Executor or Administrator for the reported property owner’s estate: Attach a certified copy fo the death certificate and Letters of Testamentary dated within 90 days of filing the claim.

**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 the claim, Claimant will indemnify and hold harmless the City of Buffalo and its officers and employees from any damages, claims, or losses of any kind resulting from the payment of the above described property to Claimant.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_