



Mail completed form:
City of Longview
Attn: Finance Division-
Unclaimed Property
P.O. Box 1952
Longview, TX 75606

Unclaimed Property Claim Form for Original Owner

Claimant must be 18 years old or older. Claimant is required to provide sufficient documentation to establish claimant's right to receive unclaimed property. Submitting your Social Security Number (SSN) is optional, but may be used in identifying you as the property owner and verifying your claim. To the extent permitted by law, the Social Security number provided will be kept confidential.

CLAIMANT INFORMATION

| | |
|--|-------------------------|
| Claimant Full Name (Including middle initial): | Social Security Number: |
| Current Mailing Address: | |
| City, State, Zip Code: | Daytime Phone Number: |
| Claim Amount: \$ | |

Please attach the following documentation:

- 1) Copy of Driver's License or any other official form used for identification
- 2) Proof of Social Security Number (not required but may help verify ownership)

**Payment will be mailed to the above-submitted address. Please allow 6-8 weeks for processing from receipt of completed form and proof of ownership.*

CLAIMANT 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 Longview and its employees from any damages, claims, or losses of any kind resulting from the payment of the above property to the Claimant.

Claimant Signature: _____ Date: _____

For Internal Use Only

| | | |
|----------------------------|-------------|---------------|
| Date Form Received: | Claim Type: | Claim Amount: |
| Documentation reviewed by: | | Approved by: |

