

CLAIM TO SURPLUS PROCEEDS OF A TAX DEED SALE

Complete and return to:
Martin County Clerk of Circuit Court and Comptroller
Attention: Tax Deeds
P.O. Box 9016
Stuart, FL 34995
Phone: 772-288-5554

Certificate #: _____
Sale Date: _____

EXCEPT FOR CLAIMS BY A PROPERTY OWNER, CLAIMS MUST BE FILED WITHIN 120 DAYS OF THE DATE THE SURPLUS NOTICE WAS MAILED OR THEY ARE BARRED.

Claimant's name * _____
Contact name if claimant is not an individual _____
Address _____ City _____ State _____ Zip _____
Phone number _____ Email _____

- I am not making a claim and waive any claim I might have to the surplus funds on this tax deed sale.
- I claim surplus proceeds resulting from the above tax deed sale. I am a ____ Lienholder ____ Titleholder.

1. **LIENHOLDER INFORMATION** (Complete if claim is based on a lien against the sold property & provide proof)
A. Type of Lien: ____ Mortgage; ____ Court Judgment; ____ Other-Describe in detail:

If your lien is recorded in the Martin County Official Records, list the following, if known:
Recording date _____; Instrument # _____; Book# _____ Page# _____
B. Original Amount of Lien \$ _____
C. Amount Remaining Due (include interest, if applicable) \$ _____

2. **TITLEHOLDER INFORMATION** (Complete if claim is based on title held on sold property & provide proof)
A. Nature of title: ____ Deed; ____ Court Judgment; ____ Other-describe in detail:

If your title is recorded in the Martin County Official Records, list the following, if known:
Recording date _____; Instrument # _____; Book# _____ Page# _____
B. Amount of surplus tax sale proceeds claimed \$ _____
C. Does the titleholder claim the subject property was homestead property? ____ Yes ____ No

3. I request that payment of any surplus funds due to me be made payable to: _____ and such payment be mailed to the address above or to: _____

4. I hereby swear that all of the above information is true and correct.

Date: _____ Signature: _____
Claimant

***INDIVIDUAL CLAIMANTS MUST PROVIDE A COPY OF THEIR GOVERNMENT ISSUED PHOTO ID**

STATE OF _____
COUNTY OF _____

The foregoing instrument was acknowledged before me by means of ____ physical presence or ____ online notarization, this ____ day of _____, 20 ____ by _____, who is ____ personally known to me or ____ who has produced _____ as identification.

(Seal)

Signature of Notary/Deputy Clerk

Printed Name