

Unclaimed Property Fund  
Business Owner Claim Form B



Mail to: Treasurer of City of Austin  
Unclaimed Property Section  
P.O. Box 2106  
Austin, TX 78768-2106  
Phone: (512) 974-1384 or (512) 974-7890

Business Name: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_  
(Last name) (First name) (Middle Initial)

Business Co-owner Name (if any): \_\_\_\_\_  
(Last name) (First name) (Middle Initial)

CURRENT ADDRESS: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Day time phone number: (\_\_\_\_) \_\_\_\_\_

**Filing Status: check applicable box below, attach documents requested.**

- \_\_\_ A TEXAS CORP., LIMITED LIABILITY COMPANY, OR PROFESSIONAL CORP.: Attach a copy of last Franchise Tax report filed. (If out of state corp., same as above including State of Corporation.)
- \_\_\_ A PROFESSIONAL ASSOC., OR NON-PROFIT CORPORATION: Attach a copy of last Annual Statement filed with the Secretary of State or copy of Articles of Incorporation.
- \_\_\_ A PRIVATE ORGANIZATION, GROUP, OR ASSOCIATION: Attach a document establishing your authority to act on behalf of organization.
- \_\_\_ A SOLE OWNERSHIP OF BUSINESS: Attach a Copy of Certificate to Operate under Assumed Name filed with the County Clerk.
- \_\_\_ A LIMITED OR GENERAL PARTNERSHIP: Attach a copy of partnership agreement, including NAMES of two partners.
- \_\_\_ If Business is OUT OF BUSINESS (CLOSED): Attach a brief statement of Closing, Articles of Dissolution or Corporation Liquidation Form filed with the Internal Revenue Service (IRS).
- \_\_\_ If Business NAME HAS CHANGED/ASSUMED/MERGED: Attach a copy of change of Name Amendment or Assumed Name Certification.
- \_\_\_ If Business was PURCHASED/SOLD: Attach a copy of Buy/Sell Agreement.

PLEASE NOTE: STATE LAW LIMITS THE FEES CHARGED BY ALL OUTSIDE SEARCH FIRMS OR PRIVATE INVESTIGATIONS THAT ASSIST.

**ATTACH THE FOLLOWING INFORMATION**

- (A). Copy of Claimant's Driver's License or any Official form used for identification.
- (B). List all addresses of the owner associated with property being claimed, including P.O. Boxes.
- (C). Applicable filing status document.

**Failure to provide the COMPLETED CLAIM FORM, IDENTIFICATION, APPLICABLE FILING STATUS DOCUMENT and SIGNATURE will result in the form being returned to you.**

**CLAIMANT SIGNATURE**

*The name Claimant hereby 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, said Claimant will indemnify and hold harmless the State of Texas, the City of Austin, the City of Austin Treasurer, their Officers and Employees, from any damages, claims or losses of any kind resulting from the payment of the above described property to claimant. Claimant must be 18 or older to claim property.*

CLAIMANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CO-OWNER (if any): \_\_\_\_\_ DATE: \_\_\_\_\_

A law passed by the Texas Legislature requires a small handling fee for certain claims. There will be NO FEE if your claim is not paid. The amount of the fee will not exceed 1% of the dollar value of the claims beginning at \$100. If a fee is assessed, it will be deducted from your claimed amount at the time of the payment. Payment should be received within 90 days from receipt of your completed form and proof of ownership.

<b>FOR INTERNAL PURPOSES ONLY</b>			
Name: _____	Year Reported: _____		
Claim Number: _____	Area Code: _____		
Property Claim Amount: _____	Property Code: _____		
By: _____ Date: _____	By: _____ Date: _____		
Treasury Accountant Associate	Treasurer		