

CLAIM TO SURPLUS PROCEEDS OF TAX DEED SALE

Note: The Clerk must pay all valid liens before making distribution to a titleholder of record.

If there is more than one titleholder, and the public records are silent regarding their shares, the Clerk will presume that the share of each titleholder is equal. Proceeds will not be disbursed to a lienholder's beneficiary or heir at law without an order of family administration, an order of summary administration or a court document disposing of personal property without administration per 735, Florida Statute (2011).

Tax Deed No. # 2015 - 04 Owner of Record: Andrew B. & Ann K. Stitzer
Date of Sale 05/07/15 R. E. Parcel No.: 03450-510R

Claimant's Name _____
E-mail Address _____ Telephone _____
Address _____

I, _____, hereby assert my claim to any surplus proceeds resulting from the tax deed sale listed above. I qualify as a:

I. LIENHOLDER Complete if you had a lien against the property sold.

A. Type of Lien

Mortgage
 Court Judgment (include Certified Copy)
 Other (describe in detail) _____

B. If your lien is recorded in the Official Records of Gulf County, list the information.

Recording Date _____
Instrument Number _____
Book and Page Number _____

C. Original Amount of Lien \$ _____

D. Amount Remaining Due (include interest, if applicable) \$ _____

E. Amount of Surplus Tax Sale Proceeds Claimed :
_____ dollars and _____ cents

II. CLAIMANT OTHER THAN LEINHOLDER Complete if you had other claim to the property.

A. Nature of Title: Deed Certified Copy of Court Judgment
 Other (describe) _____

B. If the Document in Section II is recorded in the Official Records of Gulf County, list the information.

Recording Date _____
Instrument Number _____
Book and Page Number _____

C. Amount of Surplus Tax Sale Proceeds Claimed :
_____ dollars and _____ cents

III. NO SURPLUS CLAIMED Complete if no portion of the surplus proceeds is claimed.

_____ I am not claiming any portion of the surplus proceeds.

IV. I do swear all the above information is true and correct.

Claimant's Signature: _____

Date: _____

Printed Name: _____

**STATE OF: FLORIDA
COUNTY OF: GULF**

Before me , the Claimant _____ , who is personally known to me or produced the following form of identification : _____ , personally appeared this day (mm/dd/yy) _____ and who executed the foregoing instrument and acknowledged the execution of this instrument to be his/her own free act and deed for the use and purposes therein mentioned.

Notary Public (Seal)

Commission #

Instructions for Claimant

- A. When the amount received from a Tax Deed Sale is in excess of the amount needed for payment of back taxes and expenses, a Lien Holder, a Title Holder, or a Third Party on behalf of a Lien Holder or Title Holder, may file a claim for the surplus funds by making Written Application before the deadline prescribed by Florida Statute. The Written Application must be notarized.
- B. The Claimant must submit two (2) documents as proof of identity (Birth Certificate copy, Drivers' License copy, Passport copy or similar documents bearing a picture and signature). If a Third Party is representing the Claimant, a notarized affidavit from the Claimant naming the Third Party as representative is required. The Third Party must provide one (1) proof of identity document bearing a picture and signature.
- C. In the case of a successful claim, a Form W-9 will be required for all parties before surplus funds are distributed.
- D. Send the written, notarized application for claim of surplus tax deed funds to:
Gulf County Clerk of Circuit Court
Attn: Tax Deeds
1000 Cecil G. Costin Sr. Boulevard, Room 148
Port St. Joe, Florida 3246

Before the deadline prescribed by Florida Statute of : _____ Thursday, August 20, 2015

Clerk Fee of \$10.00 and Postage is deducted for each Suplus Payment