

# CLAIM FOR EXCESS FROM THE SALE OF TAX-DEFAULTED PROPERTY

## COUNTY OF WHITE PINE

Assessor's Parcel No. \_\_\_\_\_ (FOR OFFICE USE ONLY)

Tax Sale Date \_\_\_\_\_

Claimants Deed No. \_\_\_\_\_ Date Claimants Deed was Recorded \_\_\_\_\_

**Final Date to Submit Claim** \_\_\_\_\_

**EACH PARTY MUST FILE A SEPARATE CLAIM FOR HIS OR HER INDIVIDUAL INTEREST. THIS INCLUDES HUSBAND AND WIFE, AND ALL JOINT TENANTS.**

I, the undersigned claimant, request that I be awarded the excess proceeds resulting from the sale of the above referenced property. I claim my status as a party of interest pursuant to Nevada Revised Statute 361.610. With this application for the excess proceeds, I hereby release White Pine County and the White Pine County Treasurer's Office from all claims which may arise as the result of this sale. I hereby state that I am a rightful claimant and base my status and right to file a claim on the following information and documentation:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Amount or Percentage of Excess Proceeds Claimed \$ \_\_\_\_\_, or \_\_\_\_\_%

- |   |   |
|---|---|
| <p>[2] _____<br/>Print Name</p> <p>[3] _____<br/>Mailing Address (Non U.S. Postal System Box No. is Not Acceptable)</p> <p>[4] _____<br/>City, State and Zip Code</p> <p>[5] _____<br/>Area Code and Daytime Phone Number</p> <p>[6] _____<br/>Social Security Number</p> | <p>[12] If acting on behalf of a business entity, I am duly authorized to act in its behalf pursuant to my title as indicated below:<br/>                 _____<br/>Title</p> <p>_____</p> <p>[13] _____<br/>Partnership or Corporate Tax I.D. Number</p> <p>(SEE REVERSE FOR FURTHER INSTRUCTIONS)</p> |
|---|---|

[7] Driver License No. \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

**[8] ENCLOSED ARE ORIGINALS AND/OR CERTIFIED COPIES OF DOCUMENTS SUPPORTING MY CLAIM**

**SIGNATURE REQUIRES NOTARIZATION**

I certify and declare under penalty of perjury that the foregoing is true and correct and that I have provided the required documentation and proof.

[9] Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_  
 (Day) (Month) (Year) (City/State)

[10] \_\_\_\_\_  
 Signature of Claimant (REQUIRES NOTARIZATION)

[11] State of NEVADA )  
 )  
 County of \_\_\_\_\_ )

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

On \_\_\_\_\_ before me, \_\_\_\_\_ personally appeared

\_\_\_\_\_

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity (ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

**I certify under PENALTY OF PERJURY under the laws of the State of Nevada that the foregoing paragraph is true and correct.**

**WITNESS my hand and official seal.**

Signature \_\_\_\_\_

# INSTRUCTIONS FOR FILING CLAIM

## DEFINITION OF PARTY OF INTEREST

The Nevada Revised Statute 361.610, states in part:

6. A claim for excess proceeds must be paid out in the following order of priority to:

(a) The following persons in the order of priority of the liens recorded or perfected before the sale:

(1) A person holding a valid lien under subsection 3 of NRS 444.520;

(2) Persons specified in paragraphs (b), (c), (d), (g), (h) and (i) of subsection 4 of NRS 361.585;

(3) An association, as defined in NRS 116.011, that has caused to be recorded a notice of default and election to sell the property pursuant to paragraph (b) of subsection 1 of NRS 116.31162 that has not been rescinded; and

(4) An association, as defined in NRS 116B.030, or a hotel unit owner, as defined in NRS 116B.125, that has caused to be recorded a notice of default and election to sell the property pursuant to paragraph (b) of subsection 1 of NRS 116B.635 that has not been rescinded; and

(b) Any person specified in paragraphs (a), (e) and (f) of subsection 4 of NRS 361.585.

## REQUIRED INFORMATION AND SUPPORTING DOCUMENTATION

If you consider yourself to be a party of interest in the sale of tax defaulted property as defined above, please complete numbers [1] through [11] on the reverse of this form and, if applicable, numbers [12] and [13]. You must also submit the following documents to support your claim as a party of interest:

In case (a) lienholders must submit the original recorded document or, if unattainable, a certified copy of the recorded document and original documentation such as title policy or any other original documentation which supports the claimant's right to all or portion of the excess proceeds. A payment schedule, note secured by deed of trust, partial release or partial reconveyance will also be required as well as a declaration under penalty of perjury stating how much was paid off and how much was still due and payable as of THE DATE OF SALE of the property by the Treasurer and Tax Collector. The declaration must include the calculations indicating how the total amount of the claim was determined.

In case (b), owners of record must submit the original recorded deed or other document by which they acquired an interest in the property. If the original document is unattainable, a certified copy of the recorded document and original documentation such as title policy or any other original documentation which supports the claimant's right to all or portion of excess proceeds.

Parties of interest must submit a clear copy of valid photo identification (i.e., driver's license, state ID, passport). Expired photo identification will not be accepted.

If you need assistance in filling out the form, please contact our office by telephone at (775)293-6506. Original documentation will be returned upon request.

## ASSIGNMENT OF RIGHT / APPOINTMENT OF AGENT

If a party of interest assigns his or her right to claim the excess proceeds, an Assignment of Right to Collect Excess Proceeds form must be completed in addition to this form. Any attempted assignment that does not comply with this requirement shall have no effect. Any person or entity who in any way acts on behalf of or in place of any party of interest in respect to filing a claim for any excess proceeds provided for in this section, shall submit proof that the amount of excess proceeds available has been disclosed to such party of interest and the fact that said former owner or lienholder may file for such excess proceeds on his or her own behalf. If a party of interest appoints an agent to act on his or her behalf, an Authorization for Agent to Collect Excess Proceeds form must be completed in addition to this form. Documentation as outlined above in REQUIRED INFORMATION AND SUPPORTING DOCUMENTATION will also apply when the right to claim excess proceeds has been assigned or an agent has been appointed to act on the claimant's behalf. When a claim involving an assignment of right has been approved, the refund warrant will be issued in both the assignor's and assignee's names.

## CLAIMS FILED BY BUSINESS ENTITIES

Claims filed on behalf of a company must be signed by either corporate official(s) (President, Vice President, Secretary, or Treasurer), a partner, or the sole owner. The party or parties must provide documentation proving his, her, or their authority to sign for the company. In addition, certified documentation must be provided indicating the type of business entity. (articles of incorporation, by-laws, statement by domestic stock corporation, partnership agreements, fictitious business name filing, etc.). Also see REQUIRED INFORMATION AND SUPPORTING DOCUMENTATION above.

## DEADLINE FOR FILING

We cannot by law begin processing of claims until one year has passed from the date of the deed to the purchaser. In order to receive consideration, claims must be filed ON OR BEFORE THE EXPIRATION OF ONE YEAR following the date of the recording of the deed to the purchaser.

Mail Completed Claim Forms To:

White Pine County Treasurer  
801 Clark Street Suite 2  
Ely, NV 89301

**I have read the instructions regarding  
filing a claim.**

\_\_\_\_\_  
Signature

**SIGN THE FRONT AND BACK OF THIS CLAIM, AND MAIL YOUR CLAIM AND DOCUMENTATION BY CERTIFIED MAIL TO ENSURE RECEIPT OF YOUR CLAIM BY THIS OFFICE.**