

County of Union

Diane K Reigle

Treasurer

Chief Deputy
Teresa Gill
Senior Deputy/Tax Collector
Glenda Radel

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Affidavit for Ownership

Date:

To whom it may concern:

I am _____ and I have had the responsibility of taking care of
_____ for _____ years/months(circle one). I am unable to have the previous
owner sign an affidavit making me the sole owner because_____.

I understand that by signing this I am swearing all information is true and is the best of my
knowledge.

Print: _____

Signature: _____

Date: _____