

Property Return Request

May 5, 2023 Sesquicentennial Vault Opening

Directions: An individual completing this form (Affiant) attests that the information set forth herein constitutes a true, correct, and complete statement of facts. To the extent authorized by the Constitution and laws of the State of Texas, Affiant shall indemnify and hold County harmless against any and all claims, demands, damages, liability, and costs incurred by County which directly or indirectly result from, or arise in connection with, any negligent act, omission, or false statement provided by Affiant pertaining to the information contained in this Property Return Request Form and Supporting Affidavit.

Please submit the completed and notarized Property Return Request Form and Supporting Affidavit via e-mail to Elton Mathis (e.mathis@wallercounty.us) and Brooke Bacuetes (b.bacuetes@wallercounty.us).

CONTACT INFORMATION

Name: _____
Phone Number: _____
E-Mail Address: _____

PROPERTY IN CAPSULE

Name of Individual who Placed Item(s) in Capsule: _____
Item(s): _____
Description of
Item(s): _____

Disclaimer: Completion of this form does not confer a promise or guarantee that the requested item(s) will be returned. Upon review by the County, an Individual may be requested to complete an Affidavit of Facts Concerning the Identity of Heirs (i.e., Affidavit of Heirship) and provide supporting documentation to establish a right to the property requested. Failure to do so may result in an inability to establish heirship.

FAMILY HISTORY

Is the Original Owner Deceased: Yes No

If "Yes," Date of Passing: _____

Is there a Surviving Spouse of the Original Owner: Yes No

If "Yes," Please Provide Surviving Spouse's Name/Place of Residence
(City/County/State): _____

Affiant's Relation to Original Owner: _____

Proof of Heirship (Please Mark "X" in Applicable Box)

Will Probate Affidavit of Heirship*

If Probated, Please Indicate:

Location Probate Occurred (City/County/State): _____

Date Probated: _____

***Nb:** If there is no Will or Probate has not occurred, please contact Brooke Bacuetes via e-mail at B.Bacuetes@wallercounty.us to get more information on the required Affidavit of Heirship form.

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SUPPORTING AFFIDAVIT

State of _____ §

County of _____ §

Before me, a Notary Public, on this day _____, of
(Name)

_____ being of lawful age, being first duly sworn according to law,
(City/County/State)

on oath, personally appeared known or proved to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purpose and consideration therein expressed, know the contents thereof, and that each and every statement therein contained is true, to the best of his/her knowledge and belief.

Affiant

Given under my hand and seal of office this _____ day of _____, 20____

(Seal)

Notary Public

Printed Name of Notary

My Commission Expires _____

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