



FINANCE DEPARTMENT

Request for Tax Information

Owner of Property (as of January 1) _____

Address of Property _____

Legal Description of Property/Map Number _____

New Owner/Purchaser _____ Refinance _____

Year _____ Bill Number _____ Assessed Value _____

Base Amount of Bill _____ Date Paid _____ If unpaid Amt Due _____

Prior year Delinquent Taxes _____

It is acknowledged that the responsibility to verify the accuracy of the tax information requested above, by personal inspection of the tax record, lies with the person making the request. The City has agreed as a matter of convenience and by way of accommodation to supply the information by fax and in consideration of that agreement the undersigned agrees to indemnify, hold harmless and defend the City of Florence, it's elected officials, officers, agents and employees from any and all claims, demands, liabilities actions or causes of action which may result from or arise out of the supply of such information in response to this request.

Requestor (Company Name) _____

Requested by _____ Signature _____

Fax # _____ Phone # _____

Special Notes _____

*If request is made prior to Noon, information will be faxed by 5:00 p.m.
If request is made after Noon, information will be faxed by 11:00 a. m. the following day.
Incomplete or inaccurate request information may result in a delay in the information or revocation of these privileges.*

If you have any questions, please call the City of Florence Finance Department (859) 647-5413

8100 Ewing Boulevard • Florence, Kentucky 41042-7588 • (859)647-5413 • Fax (859)647-5447

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