



TAX CERTIFICATE REQUEST

Date:

Company/Individual Name:

Address:

City

State

Zip

Agent of Company Name:

Order Number:

Ownership Name:

Account ID:

Parcel No.:

Situs Address:

Legal Description:

There is a \$10.00 fee for each request. Please submit payment with request if you do not have a house account.

Email request to: Treasurer@weld.gov or mail to: Weld County Treasurer

P.O. Box 458

Greeley, CO 80632