

Publication Deadline Waiver Form

Name of Firm: _____

Tax ID: ____-_____

Contact Name: _____

Phone Number: () ____-_____ Fax () ____-_____

Email: _____

Number of owner names: _____

Number of properties with value less than \$100.00: _____

Total value of Properties: \$ _____

Est. cost of publication: \$ _____

In the past three years have you ever applied for a wavier? YES _____ NO _____

Bureau of Unclaimed Property
Division of Revenue
8th Floor
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Fax: (302) 577-7179