

**JORDAN TAX SERVICE, INC.
BOROUGH OF AVALON
MUNICIPAL CLAIM LETTER APPLICATION**

PLEASE ENCLOSE PROPER PAYMENT WITH REQUEST & ALLOW (7) SEVEN BUSINESS DAYS TO PROCESS REQUEST.
REQUEST FOR MUNICIPAL CLAIM LETTER WILL BE RETURNED IF ALL DATA IS NOT COMPLETED.

**BOROUGH OF AVALON: Dye Testing Evidence of Compliance: Call Avalon Borough 412-761-5820
640 California Avenue, Pittsburgh, PA 15202-2499**

JORDAN TAX SERVICE, INC.: (Total Fee \$_____ - made Payable to: "**Jordan Tax Service, Inc.**"
Municipal Claim Letter (Sewage, Delinquent Borough & County): \$35.00 Per Parcel

MAIL TO: Jordan Tax Service, Inc., 102 Rahway Rd, McMurray, PA 15317 (724) 731-2351

Application Date:

REFINANCE ? YES NO MUNICIPAL CLAIM LETTER REQUEST: YES NO
SALE? YES NO

CLOSING DATE: **File #:** **Block & Lot or Other Description:**

OWNER/SELLER: Home Phone #:

Seller's Address:

Work Phone #:

Property Address:

Rental Property: YES NO Commercial Property: YES NO # of Units:

Seller's Forwarding Address:

BUYER'S NAME:

Seller's Agent: Phone #:

Requested By: Phone #:

Closing Officer: Phone #:

Closing Company: Phone #:

Mailing Address:

Fax #:

Email Address:

**PLEASE ENCLOSE PROPER PAYMENT WITH THIS REQUEST & ALLOW (7) SEVEN BUSINESS DAYS TO
PROCESS THIS REQUEST. YOUR REQUEST FOR MUNICIPAL CLAIM WILL BE RETURNED
&/OR NOT RELEASED IF ALL DATA IS NOT FULLY COMPLETED ON THIS FORM.**

**PLEASE INCLUDE SELF-ADDRESSED STAMPED ENVELOPE FOR RETURN REPLY
NO VERBALS OR FAXED INFORMATION WILL BE ISSUED FROM THIS OFFICE ON ANY REQUEST!**