## Niagara County Tax Search and/or Receipt Request Form

## Mail to - and make checks payable to: Niagara County Treasurer 59 Park Avenue Lockport NY 14094

Ordered By:			
Mailing Address:			
Phone Number:	Fax Number:		
	Please Mail Original	E-Mail Address	
		FEES:	
Ć20.00			
\$30.00			
\$5.00	( ) County Tax Receipt for	(year)	**See Collection Schedule Below**
<i>P</i>	Please allow 5 business days for proc	essing. No telephone or f	ax orders will be accepted.
PARCEL/PROPERTY INFORMATION:			
SBL#			
	(Application will not be processed without SBL #)		
Owner			
Previous Owner			
Town or City			
Street Address			
Dimensions or Acreage			
		mnortant Noto:	
Current year <u>Cou</u>		mportant Note: I collected, by the Local (	City/Town Collectors - see schedule below.
This office is responsible for collecting <b>delinquent taxes</b> , therefore, we <u>cannot</u> supply current tax year information until the Local City/Town Collectors have finished collecting.			
	**Coll	lection Schedule**	
Towns - Collect January through March 31st (Due 1/31 without penalty)			
	<b>v of North Tonawanda</b> - Collect Fe t <b>y of Niagara Falls</b> - Collect Februd		
Ç.	City of Lockport - March 1st		•
	Treasurer's Office	e Use Only - Do Not Complet	re
Date Completed:		Check/Cash:	
Document Number(s):		Email (Date & Time)	