NORTH CAROLINA
DEPARTMENT OF STATE TREASURER

UNCLAIMED PROPERTY DIVISION

BRADFORD B. BRINER
STATE TREASURER

MARYANNE FITZPATRICK
DEPUTY TREASURER

Holder Refund Request

This form should only be used to request a refund for property remitted or delivered in error per reasons listed below. Incomplete information may delay the processing of your request.

1. HOLDER INFORMATION

Name:_____ Holder ID: _____

Address:_____ FEIN: _____

City:_____ State:_____Zip: _____

Contact:_____ Phone: (___)_____

Email: _____

2. REPORT INFORMATION

Total Amount of Report: $_____Date Reported: _____

If property was reported in Aggregate, provide Aggregate amount: $ _____

3. REQUESTED REFUND INFORMATON

Reported Owner Name for which refund is being requested: _____

Reported Amount for which refund is being requested: $ _____

(If requesting refunds for multiple owners or amounts, please attach list detailing owner names and amounts.)

4. REASON(S) FOR REFUND REQUEST

_____ Clerical Error

_____ Overpaid Estimated Payment

_____NC is not the Correct Jurisdiction

_____Return of Tangible Property

5. REQUIRED HOLDER DOCUMENTARY EVIDENCE

Clerical Error – if reported in error due to: incorrect dormancy period: must provide documentation showing the property type and corresponding dormancy period used when the property was delivered or transferred and what is now believed to be the correct dormancy period; owner expressed interest in property prior to remittance: must provide proof of owner's expression of interest as stated in N.C.G.S. § 116B-53; system failure or software error: must provide documentation evidencing the error, how the error occurred and documentation that a corrected system or software is in place; other clerical error: must describe error made and provide corresponding documentation to evidence error. If request is for multiple owners, must provide a listing of reported owners and amounts being requested. Under certain circumstances, an excel file and/or accurate NAUPA file may be required.
In addition to the above, must explain what measures have been taken to ensure that error does not occur again.

NC is not the Correct Jurisdiction – if after the reporting of property to NC it is concluded that property should have been reported to another state, must provide a written explanation of how the initial and the ultimate conclusions were reached and the other state's law supporting the ultimate decision. **Please Note** – as an alternative to requesting a holder refund, the entitled State may contact NC directly to seek the transfer of property.

Overpaid Estimated Payment – if the estimated payment is in excess of the liability owed, must provide documentation of how the initial estimated payment was calculated and documentation regarding the new calculation, such as: the amount of the new calculation; how the new calculation was computed; a direct comparison between new calculation and estimated payment and if estimation was higher than ultimate liability, an explanation why.

Return of Tangible Property – financial institution, at a minimum, must provide a notarized statement by the owner requesting that their safe deposit box contents be returned to the financial institution. By signing below, the financial institution certifies that it will assume all risk and liability for the property once placed into the custody of the parcel delivery service for the property to be shipped to the financial institution.

Note: Tangible property must be shipped to a physical address. Please provide physical address below:

_____

6. CERTIFICATIONS

This form **must** be signed and notarized by **two Authorized Officers of the Holder** or **one Authorized Officer and an Authorized Employee of the Holder**.

We have read, understand and agree to the indemnification provisions of N.C.G.S. § 116B-67(e). Specifically, we agree to indemnify, save harmless, and defend the State of North Carolina, the Treasurer, and the Escheat Fund from any claim arising out of or in connection with this refund. Furthermore, we hereby certify that we are authorized officer(s) and/or an authorized employee of the original Holder or a legal successor thereto and are authorized to bind such. Additionally, we certify that this claim for a refund has been reviewed and the information provided is true and correct. We further certify that the documentary evidence provided as required in Section 4 is valid and accurate.

Signature 1

Print Name:_____

Print Title: _____

Signature: _____

Subscribed and sworn to before me this

_____day of_____20 _____

State of:_____County of:_____

Notary Public:_____

My commission expires:_____

(Seal)

Signature 2

Print Name:_____

Print Title: _____

Signature: _____

Subscribed and sworn to before me this

_____day of_____20 _____

State of:_____County of:_____

Notary Public: _____

My commission expires: _____

(Seal)

Please mail completed form and documentary evidence to:

NC DEPARTMENT OF STATE TREASURER
UNCLAIMED PROPERTY DIVISION
PO BOX 20431
RALEIGH, NORTH CAROLINA 27619-0431

If you have any questions, please call 919-814-4200, Option 3, and we will be glad to assist you.