

ASSESSMENT REQUEST FORM

Please return with payment to above address. Assessment Search Fee: \$20.00 per request

PID#:	
Owner:	
Legal Description:	
Property Address:	
Company Requesting Search:	
Mailing Address:	FAX
SPECIAL ASSESSMENT CERTIFICATION	
I hereby certify that I have searched the records of the City of Rockford, Wright/Hennepin County, Minnesota and that the pending and/or levied Special Assessments on the above named property, as of the date hereof is/are as follows: Project	
2024 tax rolls.	Balance Remaining \$ red before November 29, 2023 to prevent certification to axes: <u>\$</u>
Pending:	Outstanding City Utilities: see Note
By:	Date:
Note: CHECK UTILITIES AT CLOSING DO NOT SEND AN ESTIMATED PAYMENT FOR ANY CITY UTILTIES	