



TAX CERTIFICATION REQUEST
(Delinquent Tax Search)

Date _____

Parcel ID _____

Physical Address _____

Grantor Name _____

NOTE: Tax Certification will be faxed or emailed to requestor and must be submitted to the Register of Deeds Office with the deed for recording.

Please allow 2 business days for our office to complete your request.

Requestor Name/Firm _____

Contact Information:

Phone Number _____

Fax Number _____

Email Address _____

Please submit this request either by fax to 828-652-8401 or email to:
taxcertifications@mcdowellgov.com