



COLORADO COUNTY TREASURERS' ASSOCIATION

**AFFIDAVIT**

TO: Treasurer \_\_\_\_\_ County

Address: \_\_\_\_\_

KNOW ALL MEN BY THESE PRESENT, that the undersigned by virtue of the authority vested in him as UNIT OPERATOR of this following described property:

Taxpayer Name (As Assessed) \_\_\_\_\_

Doing Business As \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone Number (\_\_\_\_\_) \_\_\_\_\_

Taxpayer (Owner or Agent) \_\_\_\_\_

Property Location(s) \_\_\_\_\_

IN COMPLIANCE WITH Colorado Revised Statute 39-10-106 and the Policy Statement as adopted by the Colorado Association of County Treasurers on January 1, 1988, I hereby declare that available funds or sufficient assets have been and will be provided for the payment of ad valorem taxes payable this current tax year to the Treasurer of \_\_\_\_\_ County.

Bank or Institution	Address	State	Zip Code	Telephone Number
Account Number	Account Balance	Date of Balance		

It is further agreed that this account shall remain active and the balance therein shall remain at or above an amount sufficient for the payment of ad valorem taxes. A quarterly statement of the joint account, located in the State of Colorado, shall be remitted to the Treasurer from all Unit Operators who have a history of delinquency, in accordance with Section II.A. of the Colorado County Treasurer's Policy.

As Unit Operator, I accept the sole responsibility for the remittance of all ad valorem taxes assessed to the production. Failure to collect any share of taxes owed by fractional interest owners shall not relieve me of this liability.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name of Person Signing

STATE OF \_\_\_\_\_)

ss.

COUNTY OF \_\_\_\_\_)

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_

My commission expires \_\_\_\_\_.

\_\_\_\_\_  
Address

\_\_\_\_\_  
Notary Public

\*Additional Pages may be attached for property name and location.