

# Indiana County Tax Claim Bureau

Courthouse – Second Floor  
825 Philadelphia Street  
Indiana, Pennsylvania 15701-3972

Phone: (724) 465-3810  
Fax: (724) 465-3953

**Director**  
Frank E Sisko Jr

**Solicitor**  
Michael J Supinka

## Tax Lien Certification Request Form

**Name/Company** \_\_\_\_\_

**Address** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

Please issue a lien certification for the property referenced below:

**Property Owner** \_\_\_\_\_

**Property Address** \_\_\_\_\_

**Parcel #/Map ID** \_\_\_\_\_

**Reference/File #** \_\_\_\_\_

Request for:  Title Search  Manufactured Home Transfer

*Enclose a check/money order in the amount of \$5.00/certificate, along with a self-addressed, stamped envelope and/or email address. Please specify.*

