



Columbia County, Oregon

**APPLICATION FOR REINSTATEMENT
OF SUPPRESSED OWNER STATUS**

ASSESSMENT AND TAXATION RECORDS

Your Name:	Last	First	MI
Home Address:	Street		
Mailing Address: (if Different)	City	State	Zip
	Street or POBox		
	City	State	Zip

List all properties for which name suppression is to be terminated and sign below.

Account Number or Map/Taxlot:	
All Ownership Names for Property:	
Property Address:	Street
	City State Zip

Account Number or Map/Taxlot:	
All Ownership Names for Property:	
Property Address:	Street
	City State Zip

If additional properties are to be included in this application, attach additional pages.

I hereby request that information about my ownership of property in Columbia County, Oregon no longer be withheld from disclosure to the general public. I certify that the information I have provided on this form is complete and accurate to the best of my belief and understanding. I also understand that it may take some time before the County is able to remove the name suppression from the assessment and taxation records and I hereby agree to indemnify and hold harmless Columbia County and its successors and assignees free from any and all liability arising from the lack of the ability to remove the name suppression exemption in the assessment or taxation records.

Signature: _____ Date: _____