



FOR OFFICE USE ONLY:

No. \_\_\_\_\_

Date: \_\_\_\_\_

## APPLICATION FOR CERTIFICATE REGARDING PUBLIC TRUST BOUNDARY

1. **OWNER IS: (PLEASE CHECK ONE)**

\_\_\_\_\_ Individual      \_\_\_\_\_ Partnership      \_\_\_\_\_ Corporation      \_\_\_\_\_ Public Agency

Applicant's Name: \_\_\_\_\_

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

\_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
Business Other

Email: \_\_\_\_\_

*If there is more than one owner of record, please provide the information requested above  
for all such owners on a separate sheet of paper.*

2. **GEOGRAPHIC LOCATION OF PROPERTY:**

\_\_\_\_\_ Section      \_\_\_\_\_ Township      \_\_\_\_\_ Range      \_\_\_\_\_ County

Nearest City/Community: \_\_\_\_\_

Name of Waterbody (if any): \_\_\_\_\_

3. **RECORDATION OF DEED:**

This Deed is found in the Records of Deeds of the Chancery Clerk of \_\_\_\_\_ County,  
District \_\_\_\_\_, at Book \_\_\_\_\_, Pages \_\_\_\_\_ or Instrument No. \_\_\_\_\_.

4. **LOCATION OF PROPERTY**

Subdivision, Block, and Lot No. \_\_\_\_\_

5. **TAX ASSESSOR'S PARCEL NO.** \_\_\_\_\_

6. **LEGAL DESCRIPTION OF PROPERTY:** (Please attach a copy of property survey, if available.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. **SIGNATURE AND CERTIFICATION**

All statements contained above are true and correct to the best of my knowledge and belief. I agree to provide any additional data or information which may be required or requested by the Office of the Secretary of State.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title (If Partnership, Corporation or Public Agency)