



EPIC PROPERTY SERVICES

Company: _____

Address: _____

City, State: _____

Contact: _____

Special Assessments

Ordered By : _____

Order Number : _____

P.I.D. Number : _____

County : _____

Property Address : _____

City : _____

Legal Description : _____

Levied Assessments

Type of Improvement : _____

Balance Payable : _____

Certified To : _____

Pending Assessments

Type of Improvement : _____

Estimated Amount : _____

Search Date : _____

Searched By : _____