



GLENN COUNTY
 DEPARTMENT OF FINANCE
 TAX COLLECTOR DIVISION
 516 West Sycamore Street
 Willows, California 95988
 Phone: (530) 934-6410
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Humberto Medina, CPA
 Interim Director of Finance

Parker R. Hunt
 Asst. Director of Finance - Treasury

APPLICATION FOR WAIVER OF DELINQUENT PENALTIES/FEEES

Applicant Name _____ Parcel Number _____

Tax Type (Secured/Supplemental/Unsecured/Redemption) _____ Tax Year _____

Property Address _____

Mailing Address _____

Telephone _____ Email Address (Optional) _____

Delinquent penalties and fees are applied to property tax assessments in accordance with the laws set forth in the Revenue and Taxation Code of the State of California. Waiver of these penalties may be considered in vary specific circumstances, as identified in the R&T Code. Please review the information below. If you believe your circumstances qualify under the identified code sections and would like to apply for a penalty waiver, please complete this form indicating the reason you believe you qualify and return it to us with the appropriate documentation. Waiver of penalties is at the Tax Collector's discretion based on reason and supporting documentation, and is **not guaranteed**. **Please note that failure to receive a tax bill that was generated and mailed timely by the Tax Collector is NOT a qualifying circumstance, per R&T Code section 2610.5, which states in part "failure to receive a tax bill shall not relieve the lien of taxes, nor shall it prevent the imposition of penalties imposed."** The only exception to this falls under the terms of Code Section 4985 as outlined below.

Check the box associated with the reason for penalty waiver request:

- Section 2610.5:** Tax Collector failed to mail tax bill.
- Section 4985:** Tax bill was mailed to incorrect address due to Tax Collector or Assessor's error.
- Section 4985.2:** Check was returned by the bank due to bank error. **Must be accompanied by written verification from the bank.**
- Section 4985.2:** Other reasonable cause and circumstances beyond the taxpayer's control. **MUST Include written explanation of circumstances and supporting documentation.**

Complete the affidavit below, sign, and return this form along with **two** checks: **one check for the original tax amount only and one check for the penalty and fee amount only. We WILL NOT consider your application if payment is not included.** If your application is approved, the check written for the penalty and fee amount will be returned to you. If your application is not approved, both checks will be processed to satisfy the amount due on the tax bill. Please allow up to 4 weeks for penalty appeal processing.

I, _____, certify under penalty of perjury that the above information and any attached documentation is true and correct.

Signature _____ Date _____

**Tax Collector Use Only:
 Staff Recommendation**

Approval Staff _____

Denial Date _____

Tax Collector Decision

Approved Tax Collector _____

Denied Date _____