



County of Tulare

221 S. Mooney Blvd. Room 104-E
Visalia, CA 93291

Cass Cook, CFIP · Treasurer-Tax Collector
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Telephone: (559) 636-5250
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COVID-19 Penalty Cancellation Request Form:

THIS REQUEST FOR PENALTY CANCELLATION WILL NOT BE CONSIDERED WITHOUT FULL PAYMENT OF ORIGINAL TAXES (ONLINE, CHECK, OR MONEY ORDER). ANY INSTALLMENTS DUE BEFORE THE GOVERNOR'S STATE OF EMERGENCY PROCLAMATION (EXECUTIVE ORDER N-61-20) ON MARCH 4TH, 2020 DO NOT QUALIFY FOR PENALTY CANCELLATION AND MUST BE PAID IN FULL.

Claimant Name: _____

Property Address: _____

Mailing Address: _____

Daytime Telephone: _____ Email: _____

Please indicate the type of tax bill, year and installment period(s) for which you are requesting a penalty cancellation.

Bill Type

Current Year Supplemental Pay Plan Unsecured Revised Bill

A.P.N.: _____ Year: _____ Amount: _____ 1st Installment 2nd Installment

Qualifications

Owner occupied property Qualified small business*

Reason for Request of Penalty Cancellation – COVID-19 Impact:

Economic hardship Health Limitations Other

Describe in detail the reason(s) for filing this request. The failure to pay timely was due to an economic hardship or the inability to otherwise tender payment, due to the COVID-19 pandemic, and was for the following reason(s). Please attach any additional documentation that will support your claim:

You may also scan and email this request to taxhelp@co.tulare.ca.us or fill out online at www.tularecountytax.com

(Please sign and date reverse side)

*per the Small Business Administration's Regulations, Code of Federal Regulations, Title 13, section 121.201

I declare under penalty of perjury that the information contained in this request is true and correct and that I am signing as the assesse of record or as his/her authorized agent.

Signature: _____ Date: _____

Please sign and mail the request to the address below:

Treasurer-Tax Collector
Attn: Division Manager
221 S. Mooney Blvd Rm 104E
Visalia, CA 93291

A Penalty Cancellation Request will not be approved without payment of taxes in full.

TAX COLLECTOR'S USE ONLY

Request APPROVED

Request DENIED

Reason for denial: _____

Reviewer's Initials: _____ Date _____