

MELINDA L. CASILLAS
TREASURER, TAX COLLECTOR
& PUBLIC ADMINISTRATOR
 1131 San Felipe Road
 Hollister, CA 95023
 (831) 636-4034



COUNTY OF SAN BENITO
TREASURER &
TAX COLLECTOR
 (831) 636-40434
 propertytaxes@sanbenitocountyca.gov

AGREEMENT
UNSECURED PAYMENT PLAN

NAME	ASMT#
ADDRESS:	Email:
DBA:	Phone:

You have agreed to make payments on your delinquent taxes for the following account(s):

ASMT#	TAX YEAR	AMOUNT DUE AS OF	MONTHLY PAYMENT

To initiate a Payment Plan Agreement, please sign this form and mail with monthly payment above

by _____. Will be due on the _____ of each month beginning _____.

Please be aware of the following:

- (1) A lien will remain in effect until the balance is paid in full.
- (2) Interest continues to accrue on the balance at a rate of 1.5% per month on the 1st day of every month.
- (3) Failure to make timely payments could result in additional collection actions including increased costs and fees.

NOTE: You may pay the balance in full at any time.

Once the account is paid in full, any liens and/or agency holds will be released after 21 business days.

It is your responsibility to notify the County of sale or disposal of the property. In addition, it is your responsibility to notify the county if you change your mailing address.

Failure to receive a tax bill does not relieve the taxpayer of responsibility for payment, nor does it constitute cause for cancellation or waiver of penalties or costs should the bill become delinquent (R&T §2610.5.)

For further information about your installment plan, contact Monika Perales **(831) 636-4034**.

I have read and understand the above conditions for paying my delinquent taxes through a payment plan.

I hereby agree to make the required payment, including interest on the unpaid balance. I also agree to pay all current taxes coming due in each fiscal year before the delinquent date of August 31st.

Date: _____ **Signature** _____