



**Alameda County  
Office of the Treasurer  
and Tax Collector**

Henry C. Levy, Treasurer-Tax Collector

Vishal B. Thacker, Assistant Treasurer  
Julie P. Manaois, Chief Deputy Tax Collector

This form due by: **May 6, 2021\***

\* Postmark will be honored

TO: TREASURER-TAX COLLECTOR, COUNTY OF ALAMEDA

**CLAIM FOR CANCELLATION OF DELINQUENT PENALTY - COVID-19**  
(Revenue and Taxation Code Section 4985.2)

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS OF PROPERTY TAXED: \_\_\_\_\_

**2019-2020 2nd INSTALLMENT      2020-2021 1st INSTALLMENT      2020-2021 2nd INSTALLMENT**

TAX BILL PARCEL NO. \_\_\_\_\_ TRACER NO. \_\_\_\_\_

COVID-19 RELATED REASON(S) FOR LATE PAYMENT:

- Health Considerations (Enclose documentation i.e. note from physician, COVID-19 test results)
- Unemployment / Reduced hours of employment (Enclose documentation i.e. termination letter)
- Loss of income due to closure/reduction of trade/business (Bus License # \_\_\_\_\_)(Enclose support documentation)
- Loss of rental income (Enclose support documentation)
- Other financial hardship (Enclose support documentation)

Additional explanation, if needed (if more space is needed, attach extra paper):

I DECLARE UNDER PENALTY OF PERJURY THAT THIS CLAIM IS TRUE AND CORRECT.

DATED: \_\_\_\_\_ EXECUTED AT: \_\_\_\_\_  
City and State

**Check here to acknowledge  
that you have read the  
COVID-19 waiver policy.**

BY: \_\_\_\_\_  
CLAIMANT'S SIGNATURE

**Please mail your check, money order, cashier's check or certified check to:**

ATTN: COVID-19 Waiver Request  
Alameda County Treasurer & Tax Collector  
1221 Oak St. Room 131  
Oakland, CA 94612

(FOR OFFICE USE ONLY)

CLAIM STATUS: \_\_\_\_\_ DECISION BY: \_\_\_\_\_ DATE: \_\_\_\_\_

COMMENTS: