



**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 SECOND INSTALLMENT

2020-2021 FIRST 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: