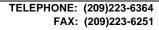
AMADOR COUNTY TREASURER - TAX COLLECTOR

810 COURT STREET, JACKSON, CA 95642-2132 ELIZABETH A. NELSON, TREASURER-TAX COLLECTOR





INSTALLMENT PAY PLAN AGREEMENT

Revenue & Taxation Code 4186 - 4337

In accordance with Revenue and Taxation Code § 4217, to start the installment plan, I understand that I must comply and agree to comply with the following conditions:

- 1. Sign and submit this installment plan agreement to the Amador County Tax Collector at the address listed above. (Original signature required)
- 2. Pay 20% of the total redemption balance, **plus** accrued interest and a processing fee of \$100.00 to start the installment plan (Revenue and Taxation Code§ 4217(b)(2).
- 3. If the plan is initiated after April 10th, pay all delinquent secured, supplemental and/or escaped tax bills (if any).
- 4. Pay, annually, on or before April 10th a minimum of 20% of the prior year delinquent amount, plus interest accruing at the rate of 1.5%. Interest accrues on the first of each month on the unpaid balance.
- 5. Pay current taxes due each year on or before April 10th as well as any supplemental and/or escaped assessments on or before applicable due dates whether or not you receive a bill or an installment plan reminder.
- 6. The unpaid balance of your installment plan, plus accrued interest, may be paid in full at any time before the fifth and final payment is due.
- 7. Failure to pay the minimum amount due, or failure to pay current taxes timely each year, will default your installment plan and the amount will be recalculated to reinstate interest on the total amount of defaulted taxes beginning at the original date of default.
- 8. If the installment plan for any reason defaults in the 5th year or later (3rd year or later for commercial property) after the declaration of default the entire outstanding balance must be paid in full and will no longer be eligible for an installment plan. Failure to pay the prior year delinquent taxes in full may result in the loss of the property at a public auction sale.

Receipts for mailed payments will be issued *if requested* at the time of remittance (Revenue & Taxation Code 4106.1). Please enclose a self-addressed envelope if you would like a receipt.

My signature constitutes an acknowledgement that I have read the contents above and that I intend to comply with the requirements of the installment plan. I further understand that any installment or redemption reminder notice the County may send is a *courtesy only*, and that the failure to receive such a notice in no way relieves me of the responsibility of making the required payments in a timely manner.

Assessment No	Date:
Signature:	Daytime Phone Number:
Printed Name:	