

COUNTY OF INYO  
TREASURER-TAX COLLECTOR  
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INDEPENDENCE, CA 93526-0614  
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Invottc@invocountv.us



ALISHA McMURTRIE  
TREASURER-TAX COLLECTOR

## REQUEST FOR PENALTY CANCELLATION - COVID-19 IMPACT

*On March 20, 2020, under authority of California Health and Safety Code, the Inyo County Department of Health & Human Services Public Health Officer ordered individuals to comply with the Stay at Home Order issued by Governor Gavin Newsom to shelter in their place of residence and to cease all non-essential travel. Let it be known that COVID-19 has impaired the ability of some taxpayers to pay their taxes by the statutory deadline of April 10, 2020. Let it further be known, on May 6, 2020, Governor Newsome issued Executive Order N-61-20 providing the framework for the Treasurer-Tax Collector to provide penalty relief for reasons associated with the COVID-19 Emergency.*

**THIS REQUEST FOR PENALTY CANCELLATION WILL NOT BE CONSIDERED WITHOUT FULL PAYMENT OF ORIGINAL TAXES – THIS REQUEST IS ONLY APPLICABLE FOR PROPERTY TAXES WITH A DELINQUENT PENALTY DATE FROM MARCH 31, 2020 THROUGH MAY 15, 2021. ANY LATE FIRST INSTALLMENT MUST BE PAID, WITH PENALTY, AT THE TIME THIS REQUEST IS SUBMITTED.**

### Assessee Information:

Please check which tax bill you are requesting a penalty cancellation:

**Secured Tax Bill:** \_\_\_\_\_ **Unsecured Tax Bill:** \_\_\_\_\_ **Supplemental Tax Bill:** \_\_\_\_\_

Applicant Name:		
Assessor's Parcel Number (APN):		
Mailing Address:		
City:	State:	Zip Code:
Daytime Phone No. ( )		
Email Address (Optional):		

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

**Economic/Financial Hardship:** \_\_\_\_\_ **Health Concerns :** \_\_\_\_\_ **Other:** \_\_\_\_\_

Please fully describe the reason(s) for making this request. The reason for this request must be associated with an economic/financial hardship and/or an inability to tender payment due to the County's or State's stay at home order or other circumstances associated with the COVID-19

pandemic.

*The failure to pay timely was due to circumstances beyond my control, occurred in spite of the exercise of ordinary care, there was no willful neglect involved, and was for the following reason(s). Attached additional pages if necessary:*


I *declare and certify* under penalty of perjury that the information contained in the foregoing statement is true and correct and that I am signing as the assessee of record or his/her authorized agent.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**For Tax Collector Use Only**

Date Received: \_\_\_\_\_ Payment Submitted: \_\_\_\_\_ (Y/N)

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ By: \_\_\_\_\_  
Date: \_\_\_\_\_

**PLEASE REVIEW THIS IMPORTANT INFORMATION BEFORE  
COMPLETING AND SUBMITTING YOUR REQUEST**

**INSTRUCTIONS:**

1. Complete the Assessee Information section, sign, and date the form. The form must be signed by an owner whose name appears on the title of the property or his/her authorized agent.
2. Attach all supporting documentation (if available) to substantiate your request. Please redact any social security numbers or confidential information on your support documentation. If documentation is not available please indicate that in your description.

**Examples of supporting documentation may include, but are not limited to, the following:**

- Note from physician or medical staff
- Hospital release form indicating date of admission
- Employer notification of employment release due to COVID-19
- Employer notification of business closing/reduced hours due to COVID-19
- Document showing owner/operator unable to conduct business due to COVID-19

3. Mail the completed and signed form, along with a check for any outstanding taxes that have a delinquent date between March 31, 2020 through April 30, 2020 (penalties excluded) to:

**Inyo County Treasurer-Tax Collector  
Alisha McMurtrie  
PO Drawer O  
Independence CA 93526**

If after review, the penalty cancellation is denied, the assessee will receive notice that the penalties are due and payable.

Please contact this office with any questions you have concerning the request for cancellation of penalties process.

Telephone: (760) 878-0312  
Email: [inyottc@inyocounty.us](mailto:inyottc@inyocounty.us)