



Visit Us Online at:
www.AlachuaCollector.com

Downtown Location
12 SE 1st Street
Gainesville, FL 32601

Southwest Location
3837 Windmeadows Blvd
Gainesville, FL 32608

Northwest Location
5830 NW 34th Blvd,
Gainesville, FL 32653

Delinquent Personal Property Tax Installment Agreement

Our mission is to serve the public with integrity, innovation, fiscal responsibility, and respect.

This is an agreement to pay your delinquent personal property tax by monthly installments. To apply for this payment method, you must comply with ALL terms associated with this agreement. Pursuant to Florida Statutes, the unpaid balance of the tax due will accumulate interest at the rate of 1-1/2 percent per month.

1. PERSONAL PROPERTY OWNER INFORMATION

Owner's Name:			Business Name:		
Mailing Address:			Physical Address:		
City:	State:	Zip:	City:	State:	Zip:
Account Number:			Phone:		

2. AGREEMENT TERMS & OWNER'S ATTESTMENT

Please read and Initial ALL of the following terms associated with this agreement.

I, the undersigned, hereby agree to pay the Tax Collector of Alachua County, Florida, delinquent personal property taxes on a monthly basis. I understand that, pursuant to Florida Statutes, the unpaid balance of all tax due will accumulate interest at the rate of 1-1/2 percent per month. By applying for this payment method, I agree to the following:

I will pay to the Tax Collector of Alachua County, the minimum amount of \$ _____, by the 1st day of _____ each month, until said account is paid in full, beginning _____, 20 ____.

I will not move, transfer, sell, dispose of or encumber this property without the express written consent of _____ the Alachua County Tax Collector.

I understand that if I do not follow the payment terms or fail to timely file returns or pay current obligations after the date of the payment plan, that I will be considered delinquent under that terms of the plan and any _____ unpaid balance of tax, penalty or interest scheduled in the payment plan will be due and payable immediately.

I understand that failure to make the agreed upon payments may result in the termination of this agreement _____ and that this property will then be subject to levy, seizure and sale by the Alachua County Tax Collector.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I AM THE OWNER OR HEIR OF THE ABOVE REFERENCED PROPERTY AND I AGREE AND UNDERSTAND THE ABOVE STATED TERMS AND CONDITIONS.

Signature of Owner/Applicant

Date

FOR TAX COLLECTOR USE ONLY

Minimum Amount Due (by the 1 st of each month):	Beginning Date of Payment:
Approved By:	Date Approved:

Alachua County Tax Collector (Tax Operations) • 12 SE 1st ST, Gainesville, FL 32601

PH: (352) 264-6968 • FAX: (352) 264-6912