



Doug Belden, Tax Collector

Account Number: \_\_\_\_\_ Tax Year: \_\_\_\_\_ Situs Address: \_\_\_\_\_

Owner Name: \_\_\_\_\_

I hereby acknowledge that I am the owner of the account number described above. By electing to pay current year taxes in partial payments, I understand it will result in the loss of any applicable discount set forth in s. 197.162, Florida Statutes, the minimum partial tax payment remitted must be \$100 plus the \$10 processing fee (as mandated by law) and any remaining balance becomes delinquent as of April 1<sup>st</sup>.

\_\_\_\_\_

\_\_\_\_\_

Signature and Date

Printed Name

*Please print, complete and mail this acknowledgement with your first partial payment.*