

Georgetown-Scott County

REVENUE COMMISSION

ONE-TIME COURTESY PENALTY WAIVER REQUEST

FEIN/SSN: _____

Taxpayer/Business Account Name:

I am writing to request to use the ONE-TIME ONLY courtesy late filing/payment penalty abatement waiver for the above named account for the following tax periods/return:

I understand that the maximum amount of this waiver is \$75.00 and that no portion of that amount can be used as a future account credit. This is a one-time courtesy waiver that can only be applied to one delinquent return.

By submitting this request, I understand and acknowledge that this courtesy waiver can only be used once and after that all subsequent abatement and/or waiver requests must be submitted by using the *Consideration of Penalty and Interest Abatement Request* policy of the Georgetown-Scott County Revenue Commission.

Printed Name: _____

Signature: _____

Date: _____

INTERNAL USE ONLY

Date Received: _____

Period of Waiver: _____

Tax Type: _____

Amount of Waiver: _____

Analyst Initials: _____

Executive Director Approval: _____