



## One-Time Property Tax Penalty Waiver Request Form

Property owners may request a waiver to avoid paying a penalty for late property tax payment.

### Current Year Taxes Only (Please print)

PIN (Property ID Number): \_\_\_\_\_

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

Owner/Taxpayer address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name and address of party requesting waiver: \_\_\_\_\_

Role at the company (if applicable): \_\_\_\_\_

Property Address: \_\_\_\_\_

**A penalty waiver will be granted one time only and must be requested in the current tax year.**

- Owners may request one penalty waiver per parcel once every 10 years.
- The waiver may apply to either the first-half OR second-half payment, but not both.
  - Completed first-half waiver requests must be received between May 16<sup>th</sup> and October 15<sup>th</sup>.
  - Completed second-half waiver requests must be received between October 16<sup>th</sup> and December 31<sup>st</sup>.
- Penalty Waivers can only be requested by the property owner or an authorized signer:
  - Owner                      ○ CEO/CFO/President or VP                      ○ Controller
  - Spouse                      ○ POA/Personal Representative
- The owner must ensure that payment and the signed waiver are received and accepted by the due date.
- Please complete one form for each parcel if requesting penalty removal for multiple properties.
- If penalty removal results in an overpayment of taxes, the balance will be applied as a pre-payment for the next tax cycle.
- To submit a waiver request, complete and sign this form (please print), and send it along with your payment, postmarked or dropped off by the deadline to:
 

Anoka County Property Records & Taxation  
 2100 3<sup>rd</sup> Ave.  
 Anoka, MN 55303

Waivers will ***not*** be granted if:

- The parcel has a history of late payments, delinquent taxes owed, or currently has a confession of judgment contract.
- The owner has used the waiver for penalty on the parcel in the last 10 years.
- The party requesting the waiver is not authorized to do so:
  - Previous owner (if the parcel was recently sold)                      ○ Manager/Supervisor
  - Relative other than spouse                      ○ Accountant
  - Title Company/Property Management Company                      ○ Tenant/Lessee

By signing this form, I am stating that I understand the conditions of this request and agree to the terms above.

Signature: \_\_\_\_\_

Day-time Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Email address: \_\_\_\_\_

**For more information regarding our abatement policy please go to:**

<https://www.anokacountymn.gov/4275/Applications-Special-Programs>

**ANOKA COUNTY OFFICE USE ONLY:**

OWNER                       APPROVE

DELQ                       DENY

ADJ DATE: \_\_\_\_\_

ADJ AMOUNT: \$ \_\_\_\_\_

INITIALS: \_\_\_\_\_