

BLANCO COUNTY APPRAISAL DISTRICT

Business Personal Property Department

Request for Waiver of BPP Rendition Penalty

GENERAL INFORMATION: This form is to request a waiver of penalty for failure to timely file a rendition or property report.

FILING INSTRUCTIONS: This document and all supporting documentation must be filed with the appraisal district office no later than 30 days after the date the property owner receives notification of the penalty. Note: All areas on the form must be completed before submission as the

request can be denied for incompleteness.	
SECTION 1: Owner and Business Information	
Business Name	Appraisal District Account Number
Property Location Address, City, State, ZIP Code	
Email Address	Phone (area code and number)
SECTION 2: Law and Requirements	
	ns 22.28, the chief appraiser shall impose a penalty on a person who fails to il to 10 percent of the total amount of taxes imposed on the property for that year strict.
	ns 22.29, the chief appraiser shall impose an additional penalty on the person es imposed on the propertyif it is finally determined by a court that the person to commit fraud or to evade the tax
the person exercised reasonable diligence to	s that the chief appraiser may waive the penalty imposed if it is determined that comply with or has substantially complied with the requirement. The written nitted no later than 30 days after the date the person receives notification
The business owner, by written request and	supporting documentation, may request a waiver of the penalty.
The business owner should state the grounds	on which the penalty should be waived.
	ation of the penalty waiver request based on the information and uests that are submitted late will be denied.
SECTION 3: Compliance and Grounds for Waiver	
Comments/Grounds for Waiver (attached additional sheets, if needed):	
SECTION 4: Supporting Documentation	
Supporting documentation attached?	Yes No
Supporting documentation attached:	No
SECTION 5: Signature	
I attest that the information on this form is true	and accurate to the best of my knowledge and belief.
Printed Name of Authorized Individual	
Signature of Authorized Individual	Date

Fax: 830-868-7330