



Webb County Appraisal District
Attn: Personal Property Department
 3302 Clark Boulevard
 Laredo, Texas 78043-3346
 Phone: (956) 718-4091
 Fax: (956) 718-4052

REQUEST FOR
“WAIVER OF RENDITION PENALTY”
FOR FILING YEAR _____

Part I – Owner / Business Name and Property Identification

Business Name	Telephone Number	WCAD Property ID:
Name of Business Owner	Business Address	
Mailing Address	City, State, Zip+4	

Part II – Law and Requirements

Pursuant to House Bill 2491 and the Texas Property Tax Code, Sections 22.28 and 22.29, if a person/business owner fails to timely file a rendition or property report, the Appraisal District shall impose a penalty in an amount equal to 10 percent (10%) of the total amount of taxes imposed by the taxing units. The Appraisal District shall also impose a 50 percent (50%) penalty if a person/business owner files a false statement or report with the intent to commit fraud or to evade a tax.

The Texas Property Tax Code, Section 22.30, also states that the Chief Appraiser for the Appraisal District may waive the penalty imposed if the Chief Appraiser determines that the person/business owner exercised reasonable diligence to comply with or has substantially complied with the requirement. **The written request for penalty waiver should be submitted 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 rendition penalty.

The business owner should state the grounds on which penalties should be waived.

The Chief Appraiser will make a determination of the penalty waiver request based on the information and supporting documentation submitted. Requests submitted late and or untimely will be denied.

Part III – Compliance and Grounds for Waiver

- **Date notice of penalty was received (attach copy of envelope with postmark):** _____
- **Comments/Grounds For Wavier (If needed, attach additional sheets):** _____

Part IV – Supporting Documentation

- **Supporting Documentation attached?** Yes No

Part V – True and Correct Affirmation

- I attest and affirm that the information provided for consideration of the penalty waiver is true and accurate.

Printed Name: _____ Date: _____
 Title: _____ Phone: _____
 Signature: _____ Fax Number: _____

NOTE: ALL AREAS ON FORM MUST BE COMPLETED BEFORE SUBMISSION AS THE REQUEST CAN BE DENIED FOR INCOMPLETENESS.