



# SAM C. STEELE, CFC

Constitutional Tax Collector  
Monroe County, Florida

## Application for Partial Payments Tax Year: 2023

Section 197.374, Florida Statutes, and Tax Collector policy allow a taxpayer to make partial payments on current year taxes. Taxpayers who enter into an agreement with the Tax Collector agree to an additional \$10.00 processing fee per payment, **forfeit any discounts**, and are responsible for maintaining a record of the remaining balance due. Taxes become delinquent on April 1, 2024, at which time no further partial payments will be accepted and the total remaining balance, as well as interest and additional fees, will apply. In addition, a tax certificate may be sold if the balance is not paid by May 31, 2024. If the property is jointly owned, only one signature is required.

**Note: A partial payment made under this agreement is not considered a good faith payment, which is required when challenging the assessment or exemptions applied to a property.**

Property Owners Name: \_\_\_\_\_

Account Number: \_\_\_\_\_ Property ID: \_\_\_\_\_

Amount Paid with Application: \_\_\_\_\_

\_\_\_\_\_  
**Initial** I understand that I forfeit any discount

\_\_\_\_\_  
**Initial** I understand that the minimum payment amount for each payment is \$100.00.

\_\_\_\_\_  
**Initial** I understand that I am responsible for a fee of \$10.00 for each partial payment.

\_\_\_\_\_  
**Initial** I understand that it is my responsibility to maintain the records for the amount outstanding.

\_\_\_\_\_  
**Initial** I understand that March 31, 2024, is the deadline to make a partial payment.

\_\_\_\_\_  
**Initial** I understand that the total tax due must be paid by May 31, 2024, to avoid a tax certificate (tax lien) being sold for the remaining balance.

Please be sure to read and initial all six informational points listed above.  
Failure to initial all six will result in this application being returned to the sender.

\_\_\_\_\_  
**Signature of Property Owner**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Email Address**

\_\_\_\_\_  
**Phone Number**

The application can be returned by mail to Sam C. Steele, Tax Collector, P.O. Box 1129  
Key West, FL 33041-1129, or by email to [ssanchez@monroetaxcollector.com](mailto:ssanchez@monroetaxcollector.com).