



PROPERTY TAX PROGRAM EXEMPTION REQUEST

Now you can opt to pay your County property taxes individually. All you have to do is:

- Complete the application form below and mail to: California Department of Veteran Affairs, Attn: Loan Servicing Unit, PO Box 942895, Sacramento, CA 94295-0001.
- Attach a processing fee of \$25.00 to your request form made payable to California Department of Veterans Affairs.
- Submit yearly proof of tax payment (by January 31st if you pay annually, or January 31st and May 31st if you pay semi-annually).

Please continue to include your tax installment in your monthly payment until you receive a notice that your request has been approved and providing you with an effective date. **Only accounts with property taxes and monthly payments in a current standing (not delinquent or deficient), those individuals with a satisfactory credit record, and those properties with at least a 20% equity cushion will be eligible for the program.** After the effective date, you will see a reduction in your loan payment reflecting that the tax installment has been removed. From the time you send in your request, it will take approximately four to six weeks to remove you from the tax impound program. Excess funds remaining in the tax impound account will be refunded at the next disclosure process.

For questions regarding the property tax impound program, please call our Loan Servicing Unit through our toll free number at 1-800-952-5626, directly at 916-503-8362 or e-mail them at loanserv@calvet.ca.gov.

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PROPERTY TAX IMPOUND REMOVAL REQUEST: (Existing Loan)

Cal-Vet Contract # _____ County _____

Last name _____ Middle Initial _____ First Name _____

Mailing Address _____ City _____

State _____ Zip _____ E-Mail _____

Home Phone (____) _____ Daytime Phone (____) _____

I hereby authorize California Department of Veterans Affairs (CDVA) to remove my account from the property tax impound program and adjust my monthly payment accordingly. I understand and agree that in order to be eligible for removal from the tax program, I must remit a processing fee of \$25.00 with this request, there must be 20% equity cushion in my property (as determined by CDVA), that I must have a credit record in good standing (as determined by CDVA), and that I must provide proof of payment of property taxes by January 31st if I am paying my property taxes annually, or by January 31st and May 31st if I am paying semi-annually. I understand that it is my responsibility to ensure property taxes are paid, and understand that if they are not paid and become delinquent, CDVA will immediately place me in the property tax program and increase my payment sufficiently to cover the tax impounds. I understand that I can return to the tax program voluntarily at any time upon written request.

Signatures: _____

(Contract Holder)

(Date)

(Spouse)

(Date)