

Appeal of ABx1 27 Remittance Amount

Provide the requested information and remit the completed form to the following e-mail address: Redevelopment_Administration@dof.ca.gov

Submit one form for each redevelopment agency whose remittance amount is being appealed.

Include the name of the requesting city or county and the name of the redevelopment agency in the e-mail's subject line.

Forms must be received by the Department of Finance no later than August 15, 2011.

Name of city or county: _____

Name of redevelopment agency whose remittance amount is being appealed: _____

Basis for appeal (check those that apply):

1. Information in the 2008-09 Controller's Report was in error: _____
2. Percentage of tax increment needed to pay tax allocation bonds and interest payments has increased by 10 percent or more over the percentage calculated in the 2008-09 Controller's Report: _____

If you checked Number One as the basis for appeal, provide the following information

What information in the Controller's Report was in error (check those that apply):

- Tax allocation bond amount: _____

If checking the above, provide the following information (use whole dollars):

Amount reported in 2008-09 Controller's Report: _____

Correct amount: _____

- Interest payment amount: _____

If checking the above, provide the following information (use whole dollars):

Amount reported in 2008-09 Controller's Report: _____

Correct amount: _____

- Passthrough payment amount(s): _____

If checking the above, provide the following information for each passthrough payment that was incorrectly reported (use whole dollars):

Cities:

Amount(s) reported in 2008-09 Controller's Report: _____

Correct amount(s): _____

County:

Amount(s) reported in 2008-09 Controller's Report: _____

Correct amount(s): _____

Special Districts:

Amount(s) reported in 2008-09 Controller's Report: _____

Correct amount(s): _____

School Districts:

Amount(s) reported in 2008-09 Controller's Report: _____

Correct amount(s): _____

Community College Districts:

Amount(s) reported in 2008-09 Controller's Report: _____

Correct amount(s): _____

- Other (provide specific information, using additional space if necessary): _____

If you checked Number Two as the basis for appeal, provide the following information (use whole dollars)

- Amount of tax increment reported as necessary to pay tax allocation bonds and interest in the 2008-09 Controller's Report: _____

- Actual amount of tax increment used to pay tax allocation bonds and interest in 2010-11. Include a scanned copy of supporting fiscal document(s): _____
- The actual amount of tax increment needed to make the minimum required tax allocation bond and interest payments in 2011-12: _____
- Tax allocation bond debt reported in the 2008-09 Controller's Report: _____
- Current tax allocation bond debt. Include a scanned copy of supporting fiscal document(s): _____

Provide the name, title, phone number, and e-mail address of at least two people authorized to answer questions concerning your appeal:

First contact's name and title: _____

First contact's phone number and e-mail address: _____

Second contact's name and title: _____

Second contact's phone number and e-mail address: _____