Monterey County Board of Supervisors Referral Submittal Form

Referral No. 2023.02 Assignment Date: 02/07/23

(Completed by CAO's Office)

SUBMITTAL - Completed by referring Board office and returned to CAO no later than <u>noon</u> on Thursday prior to Board meeting:

Date: 1/27/2023	Submitted By:	LUIS ALEJO			Di	istrict # : 1
Referral Title: EAS	Y SMART PAY	FOR PROPERT	Y TAX MON	THLY INS	STALLME	NTS PAYMENTS
Referral Purpose: To	implement the F	Casy Smart Pay P	rogram to pr	ovide Mon	terey Coun	ty residents and
businesses the optio	n of making mon	thly installments	on their pro	perty tax pa	ayments.	
Brief Referral Description (attach additional sheet as required): Many property owners have the option to pay						
their property taxes in	n monthly installn	nent through escro	w accounts w	ith banks ov	wning mortg	ages on their
property. However, p	property owners w	ho own their prop	erty outright,	or do not ha	we escrow a	ccounts, do not
have the option to pa						
creates financial hard	1		The County	Tax Collect	or lacks auth	nority to bill
property owners in m	onthly installmen	ts.				
Easy Smart Pay provides this service to county taxpayers on a voluntary basis. The program is overseen by the California State Association of Counties Finance Corporation. To implement this program in Monterey County, the Board of Supervisors must approve a resolution granting its implementation. Once implemented, it would need to be promoted and advertised. This program would provide a much-needed service to thousands of our county home and business owners and taxpayers.						
Classif	ication - Implicat	ion		Mode	of Respon	se
□ Ministerial / M	linor		🗆 Memo	🗷 Board	Report	Presentation
□ Land Use Polic	су		Requested Response Timeline			
□ Social Policy			\Box 2 weeks	×	1 month	\Box 6 weeks
•	■ Budget Policy □ Status reports until completed					
 Other: Tax Collector Services 		□ Other:	•	1	ic Date:	

ASSIGNMENT – Provided by CAO at Board Meeting. Copied to Board Offices and Department Head(s) Completed by CAO's Office :

Department(s): Treasurer-Tax Collector	Referral Lead: Mary Zeeb	Board Date: 2/7/23
REASSIGNMENT – Provided by CAO.	Copied to Board Offices and Departme	ent Head(s). Completed by

CAO's Office:	
Department(s):	

Referral Lead:

Date:

ANALYSIS - Completed by Department and copied to Board Offices and CAO:

Department analysis of resources required/impact on existing department priorities to complete referral:					
Analysis Completed By:	Department's Recommended Response Timeline				
	□ By requested date				
_	\Box 2 weeks \Box 1 month \Box 6 weeks \Box 6 months				
Date:	□ 1 year □ Other/ Specific Date:				

REFERRAL RESPONSE/COMPLETION - Provided by Department to Board Offices and CAO:

Referral Response Date:	Board Item No.:	Referrals List Deletion:				