



**County of Santa Clara Controller-Treasurer Department**  
**Special Assessments**  
**Form C: Annual Enrollment Form**

**Enrollment for Secured Property Tax Bill for  
Special Assessment (SA) Number**

**FY 2022-23**

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District Information					
Taxing Entity Name					
SA Name on Tax Bill					
Measure & Election Year					
Resolution/ Ordinance					
Statutory / Legal Authority					
Agency Type		Classification			
Effective Period		Judiciary Foreclosable		Proration	
Description of SA					
Public Contact Information					
Name				Phone Number	
Email					

Please contact us regarding any changes to the information above: [SA\\_Mail@fin.sccgov.org](mailto:SA_Mail@fin.sccgov.org)

Annual Enrollment Details				
Parcel Count	Residential	Commercial	Other	Total
				0
Total Annual Assessment Dollar Amount				

**AGENCY AGREEMENT:**

*This is to certify the agency's special assessment amount to be applied on each parcel of real property is correct and valid. I have read and understand the Fiscal Year 2022-23 special assessment instruction letter explaining the terms and conditions, requirements, and the County costs for the agency's special assessment enrollment on the County Annual Secured tax roll, and agree to those terms and conditions therein for all special assessments submitted.*

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Agency \_\_\_\_\_

Title \_\_\_\_\_ Phone No. \_\_\_\_\_

Email \_\_\_\_\_