



Commonwealth of Kentucky  
**OMITTED REAL ESTATE PROPERTY TAX BILL**

Bill No. \_\_\_\_\_

\_\_\_\_\_  
 County Name

Assessment Date: January 1, \_\_\_\_\_

Taxpayer Name and Address

Date Issued: \_\_\_\_\_

**OMITTED ASSESSED VALUE** \_\_\_\_\_

**Tax Amounts**

State Tax Rate \_\_\_\_\_

\_\_\_\_\_

County Tax Rate \_\_\_\_\_

\_\_\_\_\_

School Tax Rate \_\_\_\_\_

\_\_\_\_\_

Library Tax Rate \_\_\_\_\_

\_\_\_\_\_

Health Tax Rate \_\_\_\_\_

\_\_\_\_\_

Co. Ext. Tax Rate \_\_\_\_\_

\_\_\_\_\_

Soil Tax Rate \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Tax Rate \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Tax Rate \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Tax Rate \_\_\_\_\_

\_\_\_\_\_

**TOTAL TAX DUE** \_\_\_\_\_

**OMITTED PENALTY**  
 (Computed on Tax)  
 10% if voluntarily  
 listed; 20% if  
 involuntarily listed

\_\_\_\_\_

**INTEREST**—At the tax  
 interest rate as defined  
 in KRS 131.010(6) from  
 January 1 following  
 the assessment  
 shown above to 30  
 days after date bill is  
 issued. (Computed  
 on Tax)

\_\_\_\_\_

**TOTAL TAX PENALTY  
 AND INTEREST**

\_\_\_\_\_

**PAYMENT DUE BY**

\_\_\_\_\_

County Clerk's Signature: \_\_\_\_\_

Payment Received By: \_\_\_\_\_

Sheriff or Deputy

\_\_\_\_\_

Date

**PLEASE MAKE PAYMENT BY DUE DATE TO SHERIFF'S OFFICE**

62A301-S (1-13)

APPROPRIATE PENALTIES AND SHERIFF'S FEES WILL BE  
 ADDED TO THE TOTAL DUE IF NOT PAID BY DUE DATE.  
 DELINQUENT FEES AND INTEREST APPLY IF BILL IS  
 TRANSFERRED TO COUNTY CLERK'S OFFICE.

