



MARTY G. EUBANK
Treasurer

CITY OF NEWPORT NEWS

OFFICE OF THE TREASURER

P.O BOX 975
NEWPORT NEWS, VIRGINIA 23607-0975
(757) 926-8731 • Facsimile (757) 926-8274

Payment Arrangement Request

Personal Information

First Name: _____ Middle Initial: _____ Last Name: _____

Address: _____ City, State, Zip: _____

Phone: _____ Email: _____

Tax Account Information

Tax Type: Personal Property/Vehicle License Fee
Account Number(s) or SSN

Real Estate/Stormwater
Account Number(s) or Parcel ID(s)

Financial Information

Primary Employer: _____ Secondary Employer: _____

Financial Institution Routing Number: _____

Basis for Request: Employment furloughed temporarily Employment terminated
 Business closed temporarily Business closed down permanently

Other: _____

Please describe what conditions have placed you in a financial hardship

Signature: _____

By signing above, you swear and attest that the information you have provided on this application is true and correct.