

2024 1 2 3 4 5 6 7 8 9 10 11 2025

KITTERY E-Z EXTENDED PAYMENTS - "KEEP" PAY YOUR TAX BILL WITH EASY INSTALLMENTS

- > KEEP allows property owners to pay their taxes in **11 installments**.
- > The first 10 installments will be the same, with the **final installment** (due May 15) adjusted, up or down, depending upon the remaining taxes due.
- > KEEP is available for the 2024-2025 property taxes and only to those taxpayers who are **current** on their tax obligations.
- > Monthly tax payments will be **due the 15th** of each month, beginning July 15. Late payments will **void the KEEP agreement**.
- > Payments will be based on the committed taxes for the **prior** tax year, plus 5%.



- > Monthly payments may not be adjusted, but **may** be prepaid.
- > KEEP applications are valid for one year only. If you are a current KEEP participant, you MUST reapply.
- > KEEP is **not available** to taxpayers paying through a tax escrow account with their bank or mortgage company.
- > Transfer of ownership **voids** the plan, unless the transfer is made to a name provided on the current KEEP application.
- > Supplemental taxes **do not** qualify for KEEP.
- > Abatements **will not** reduce the monthly payment.



- > KEEP applications must be postmarked or received no later than **June 1**.
- > Payments in person or by mail must be received by the 15th of each month at the following address:

**Town of Kittery
Tax Collector
200 Rogers Road
Kittery, ME 03904**

Should you have any questions, please contact:

Pauline Brewster, Deputy Tax Collector at pbrewster@kittery.me.org and 207-475-1316.

Please complete the information below and **return the entire sheet (do not separate)** to the address  above **no later than June 1**.

Property Location/Address: _____ Parcel ID (on tax bill): _____ Map: _____ Lot: _____

Property Owner(s): _____ Phone: _____ Email: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

I have read the above and agree to comply with the KEEP payment requirements (sign):

Signed: _____ Date: _____ Signed: _____ Date: _____

TO BE COMPLETED BY TOWN: DATE RECEIVED: _____ FY TAX BILL: _____ MONTHLY PMT: _____