

## Attachment 6- Direct Charge File Format

June 13, 2023

To: County Taxing Entities  
Subject: Direct Charge File Format

Direct assessment charges may be submitted via e-mail, CD, or USB drive. The file formatting is extremely important, as is the integrity of the data within the file. Please double check formatting, Assessment numbers, dollar amounts, and tax codes before sending your file. See the attached pages for details on the various acceptable formats. Files with formatting errors will be rejected by our property tax system and will be returned to you for correction.

The file needs to be submitted with the entity name, filename, description, tax code and number of records. If this is your first time submitting information, please send a test file with ten records at least 30 days prior to the preparation of your data.

Please make sure you retain a copy of your file in your office as we don't archive direct charge import files from year to year.

If you have any questions regarding this process, please contact:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone#

\_\_\_\_\_  
Fax #

## **DIRECT CHARGE FILE LAYOUT**

### **MEDIA:**

TXT, XLS, XLSX, or CSV files can be sent via e-mail, CD, or USB drive.

### **FORMAT:**

LAYOUT: (see attached sheet).

1. Quote/Comma Delimited – Fields are enclosed by quotation marks and separated by commas.
2. Comma Delimited – Fields are separated by commas.
3. Fixed-length Format – Fields are run together without separation. All fields, except the description field must be “left zero filled”.
4. Tab Delimited Format – Fields are separated by tabs.

### **FIELDS:**

**Field 1.** (APN) The Assessor’s Parcel Number – 12 digits.

**Field 2.** (Amount) The amount to be billed to the tax payer. It must be an even amount (divisible by 2). If it's negative, put the minus (-) sign in front of the amount (i.e. -110.00). Use the decimal point on all amounts EXCEPT fixed length.

**Field 3.** (Tax Code) 5 digit tax code. Obtain your tax code from the Auditor’s Office.

**Field 4.** (Desc.) An optional field of ten digits is provided for your district or agency identification.

For “Quote/Comma” and “Comma” dashes will not be allowed in the APN number. Signs must be separate (do not sign positive numbers). If the format is “Quote/Comma” (“Quote/Comma” in this context means that ALL fields must be quoted), a dollar sign (\$) is permitted.

For “Fixed Length” formats, a negative sign must be a trailing over-punch, no decimal points. The decimal position is assumed to be two positions from the end of the dollar amount.

## DIRECT CHARGE FILE LAYOUT SAMPLES

```
|...+...1...+...2...+...3...+...4...+...5...+...6...+...7
      APN      AMT      TAX      DESC
... Quote/Comma Delimited Format ...
"012010012000","114.00","61500","TEST TESTS"
"012010013000","-114.00","61500","TEST TESTS"
"012010014000","114.00","61500","TEST TESTS"
"012010015000","114.00","61500","TEST TESTS"
"012010016000","114.00","61500","TEST TESTS"
```

```
|...+...1...+...2...+...3...+...4...+...5...+...6...+...7
      APN      AMT      TAX      DESC
... Comma Delimited Format ...
012010012000,114.00,61500,TEST TESTS
012010013000,114.00,61500,TEST TESTS
012010014000,114.00,61500,TEST TESTS
012010015000,114.00,61500,TEST TESTS
012010016000,114.00,61500,TEST TESTS
```

```
|...+...1...+...2...+...3...+...4...+...5...+...6...+...7
      APN      AMT      TAX      DESC
... Fixed length Format ...
012010012000000000001140061500TEST TESTS
012010013000000000001140061500TEST TESTS
012010014000000000001140061500TEST TESTS
012010015000000000001140061500TEST TESTS
012010016000000000001140061500TEST TESTS
```

```
|...+...1...+...2...+...3...+...4...+...5...+...6...+...7
      APN      AMT      TAX      DESC
... Tab Delimited Format ...
012010012000(Tab)114.00(Tab)61500(Tab)TEST TESTS
012010013000(Tab)114.00(Tab)61500(Tab)TEST TESTS
012010014000(Tab)114.00(Tab)61500(Tab)TEST TESTS
012010015000(Tab)114.00(Tab)61500(Tab)TEST TESTS
012010016000(Tab)114.00(Tab)61500(Tab)TEST TESTS
```

```

      APN# = Columns 01-12 (12 Characters)
      Amount = Columns 13-23 (11 Characters)
      Tax Code = Columns 24-28 (05 Characters)
(Optional) Agency ID = Columns 29-38 (10 Characters)
```

### CONVENTIONS

- Do NOT use (-) in the APN # (i.e. 012-001-013-000 is NOT acceptable; 012001013000 is acceptable.) You must submit it with all zero's.
- The APN # is 12 digits. LEADING ZEROS MUST BE SUPPLIED IF NEEDED.
- If the dollar (\$) amount is negative, use a leading minus (-) sign (i.e. -114.00).
- Use a decimal point in the dollar (\$) amount, EXCEPT if fixed length.

## COUNTY PROPERTY TAX SECTION

### INFORMATION SHEET

Please complete this form and include it with the hard copy of your information and your data file.

AGENCY NAME City of Manteca  
ADDRESS 1001 W Center St  
Manteca CA 95337  
DEPARTMENT Police Department  
CONTACT Carly Lewis  
PHONE NUMBER 209-456-8156 FAX NUMBER 209-923-8934

FILE NAME 2025-2026 Direct Assessment  
DESCRIPTION Municipal and State Codes  
TAX CODE 82030  
# OF RECORDS 228  
TOTAL DOLLARS 704,951.52