

**Figure: 10 TAC §80.93(b)**

Texas Department of Housing and Community Affairs  
Tax Lien File Layout

| <b>MUST be ASCII Fixed Record Layout (Text Format)</b>                  |                |          |         |   |
|---|----------------|----------|---------|---|
| <b>516 bytes total per each record</b>                                  |                |          |         |   |
| <b>All text fields, addresses, names, etc should be left justified.</b> |                |          |         |   |
| ITEM  |                | PICTURE  | OFFSET  | Additional Information for Accurate Filing  |
| <b>Home Identification</b>  |                |          |         |   |
| Label-No  |                | Alpha 10 | 1-10    | The label number must be exactly 10 characters - anything more or less will be invalid. Also, additional text ( <i>i.e.</i> , "Lab#" before the label or "A" or "A/B" after the number) will invalidate the field.<br><br>If there is no label number, LEAVE SPACES BLANK – DO NOT enter ZEROS, UNKNOWN, NONE or anything else in this field.   |
| Serial-No   |                | Alpha 26 | 11-36   | Serial numbers must only include the number of the first section - and <b>not</b> be prefixed with anything else ( <i>i.e.</i> , SER#, #, S#, or using both section letters as A/B).<br><br>The chances of recording a lien with only a serial number are very slim. Having a label number is the best chance for a successful recording.<br><br>If there is no serial number, LEAVE SPACES BLANK – DO NOT enter ZEROS, UNKNOWN, NONE or anything else in this field. |
| FILLER (blank spaces)   |                | Alpha 20 | 37-56   | Model name is no longer required, so leave the 20-spaces originally allocated for this blank.   |
| <b>Taxpayer Identification</b>  |                |          |         |   |
| Taxpayer-Name   | Left Justified | Alpha 40 | 57-96   |   |
| Taxpayer-Name2  | Left Justified | Alpha 40 | 97-136  |   |
| Taxpayer-Addr1  | Left Justified | Alpha 30 | 137-166 |   |
| Taxpayer-Addr2  | Left Justified | Alpha 30 | 167-196 |   |
| Taxpayer-City   | Left Justified | Alpha 20 | 197-216 |   |
| Taxpayer-State  | Left Justified | Alpha 2  | 217-218 |   |
| Taxpayer-Zipcode  |                | Alpha 10 | 219-228 |   |

| ITEM  |                | PICTURE  | OFFSET  | Additional Information for Accurate Filing   |
|---|----------------|----------|---------|--|
| <b>Collector Identification</b>                         |                |          |         |  |
| Collector-Tax-Entity-ID or Central Tax Collector Number |                | Alpha 10 | 229-238 | The taxing entity id or the Dept. assigned Central Tax Collector number MUST be 10 characters and in the following format XXX-XXX-XX.              |
| Collector-Name  | Left Justified | Alpha 40 | 239-278 | Enter the name of the taxing jurisdiction.   |
| Collector-Name2   | Left Justified | Alpha 40 | 279-318 | Enter the name of the collector.   |
| Collector-Addr1   | Left Justified | Alpha 30 | 319-348 |  |
| Collector-Addr2   | Left Justified | Alpha 30 | 349-378 |  |
| Collector-City  | Left Justified | Alpha 20 | 379-398 |  |
| Collector-State   | Left Justified | Alpha 2  | 399-400 |  |
| Collector-Zipcode                                       |                | Alpha 10 | 401-410 |  |
| <b>Lien Information</b>                                 |                |          |         |  |
| Tax-Roll-Account-No                                     |                | Alpha 26 | 411-436 |  |
| FILLER (blank spaces)                                   |                | Alpha 8  | 437-444 | Lien date is the date the lien is received by TDHCA and will be inserted when recorded; so leave the 8-spaces originally allocated for this blank. |
| Tax-Year - YYYY   |                | Alpha 4  | 445-448 |  |
| Tax Amount  |                | Alpha 8  | 449-456 | The tax amount is required and must be entered without a decimal point (Example: If tax amount is \$300.25, please entered as 00030025).           |
| Release-Date – YYYYMMDD                                 |                | Alpha 8  | 457-464 | The date MUST be formatted as YYYYMMDD and have no slashes or spaces.  |
| FILLER (blank spaces)                                   |                | Alpha 49 | 465-513 |  |
| County Code   |                | Alpha 3  | 514-516 | A carriage return after entering the 3-digit County Code is needed after each record for proper formatting.  |