

Application for Tax Liability Relief

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To Whom It May Concern,

I am writing to formally request relief from my current tax liabilities due to [briefly explain your situation, e.g., financial hardship, medical expenses, etc.]. My taxpayer identification number is [Your Tax ID Number].

In support of my application, I have attached the following documentation:

- [Document 1]
- [Document 2]
- [Document 3]

I kindly ask for your understanding and consideration regarding my request for tax liability relief. Please let me know if you require any additional information or further documentation.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]