## **Application for Altered Tax Payment Schedule**

Date: [Insert Date]

[Your Name] [Your Address] [City, State, Zip Code] [Your Email Address] [Your Phone Number]

[Tax Authority Name] [Tax Authority Address] [City, State, Zip Code]

Dear [Tax Authority's Name/Title],

I am writing to formally request an alteration to my current tax payment schedule due to [brief explanation of your situation, e.g., financial hardship, unexpected expenses]. My tax identification number is [Your Tax ID Number], and I filed my taxes for the year [Insert Year].

I have attached supporting documents outlining my situation and my proposed new payment schedule. I am hopeful that we can come to a mutually agreeable arrangement that will allow me to fulfill my tax obligations while managing my current circumstances.

Thank you for considering my request. I look forward to your prompt response.

Sincerely, [Your Name]