

Tax Payment Arrangement Change Request

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

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

Dear [Tax Authority Contact Name],

I am writing to request a change in my current tax payment arrangement. My name is [Your Full Name], and my tax identification number is [Your Tax ID]. Due to [brief explanation of circumstances], I am unable to adhere to the current payment schedule.

I would like to propose the following changes to my payment arrangement: [Detail the proposed new terms].

I appreciate your understanding and consideration of my situation. Please let me know if you require any further information or documentation to process my request.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,
[Your Name]