

Deferred Payment Agreement

Date: [Insert Date]

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

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

Subject: Deferred Payment Agreement for Tax Obligations

Dear [Tax Authority Representative's Name],

I am writing to request a deferred payment agreement regarding my outstanding tax obligations for the tax year [insert tax year]. My tax identification number is [insert tax ID or SSN]. Due to [brief explanation of circumstances causing financial hardship], I am unable to pay the total amount due by the original deadline.

I propose to make payments of [insert proposed payment amount] per month, starting on [insert start date], until the total amount is paid off. This arrangement would allow me to fulfill my obligations while managing my financial situation more effectively.

I respectfully ask for your consideration of this proposal and would be grateful if you could confirm your agreement or suggest an alternative that might work for both parties. I am committed to settling my tax obligations and appreciate your understanding in this matter.

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

Sincerely,

[Your Name]
[Your Title, if applicable]