

# Payment Plan Agreement for Tax Liabilities

Date: [Insert Date]

To: [Tax Authority Name]

[Tax Authority Address]

[City, State, Zip Code]

Subject: Payment Plan Agreement for Tax Liabilities

Dear [Tax Authority Representative's Name],

I, [Your Name], residing at [Your Address], am writing to request a formal payment plan for my outstanding tax liabilities. My tax identification number is [Your Tax ID Number]. Due to [brief explanation of financial hardship/reason], I am unable to pay the full amount owed at this time.

I propose the following payment plan:

- Total Amount Owed: \$[Insert Total Amount]
- Proposed Monthly Payment: \$[Insert Monthly Payment]
- Payment Start Date: [Insert Start Date]
- Duration: [Insert Duration] months

I am committed to fulfilling my tax obligations and believe this payment plan allows me to do so without undue financial hardship. I kindly request your consideration and approval of this proposal.

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

Sincerely,

[Your Name]

[Your Phone Number]

[Your Email Address]