



Income Tax Installment Payment Agreement Request

- Unless you are filing this form electronically (*see instructions*), attach this completed form to the front of your 2004 New York State income tax return.
- Complete this request form only if you cannot pay the full amount of income tax you owe as shown on your 2004 New York State income tax return. The Tax Department will consider your request based upon the information you provide below, and notify you whether your request is approved or denied.
- This form must be completed in its entirety. Be sure to include your daytime telephone number to avoid any unnecessary delay in the processing of your request.

(See instructions on the back.)

Your social security number		Spouse's social security number (if joint return)	
Please enter your first name first. For a joint return, use both name lines.			
Your first name and middle initial		Your last name (for a joint return, enter spouse's name on line below)	
Spouse's first name and middle initial		Spouse's last name	
Mailing address (number and street or rural route)			Apartment number
City, village, or post office		State	ZIP code
In the space below, print or type your permanent home address if it is not the same as your mailing address above.			
Permanent home address (number and street or rural route)			Apartment number
City, village, or post office		State	ZIP code

Your daytime telephone number ()	Your evening telephone number ()
--------------------------------------	--------------------------------------

Employment information:
Your gross monthly salary \$.

Your employer's name			
Employer's address			
City	County	State	ZIP code

Your spouse's gross monthly salary (if joint return) \$.

Your spouse's employer's name			
Employer's address			
City	County	State	ZIP code

If you would like us to set up a payment agreement for your Internal Revenue Service (IRS) liability, mark an **X** here (*see instructions*)

If we approve your request, we agree to let you pay the tax you owe in monthly installments (12 months maximum). Make your payment as large as possible (minimum \$25 per month) to limit the interest and penalty charges. These charges will continue to be added to the unpaid balance. In return, you agree to make your monthly installments by a direct transfer from your bank account. Monthly installments will be directly withdrawn from your specified account on the 15th of every month until the tax, penalty, and interest you owe is paid in full.

- Enter the number of monthly payments (between 3 and 12) that you will need in the box

Direct debit information (*see instructions*)

Name and address of your bank

Checking Savings

Bank routing and transit number (*see instructions*)

Account number (*mark an X in one box above to specify either a checking or savings account*)

Unless you are filing this form electronically (*see instructions*), attach this completed Form DTF-383 and your initial payment to the front of your 2004 income tax return, and send it to the Tax Department. We will notify you whether your request is approved or denied.

I (we) hereby authorize the New York State Department of Taxation and Finance to initiate debit entries to the checking/savings account indicated above and the bank named above to debit the account for the amount of the monthly installment payment. This authority is to remain in full force and effect until the Tax Department and the bank have received written notification from me (or joint account holder) of its termination in such time and in such manner as to afford reasonable opportunity to act on it.

If the Tax Department cannot deduct the monthly payment from my account on the date specified because of insufficient funds or because my account is closed, the Tax Department may cancel my installment agreement. I will be responsible for any overdraft fees charged by my bank.

Your signature	Date	Spouse's signature (if joint return)	Date
Account holder's signature (if different from taxpayer)			Date

If you have questions about this form, or to discuss an existing payment agreement, please contact the Tax Department at **1 877 698-2907**.