GA-9465 GEORGIA INDIVIDUAL INCOME TAX INSTALLMENT AGREEMENT REQUEST 2004

If you are unable to pay the full amount of tax due with your individual income tax return, you may request an installment agreement by completing this form. You are encouraged to make payments as large as possible to minimize the penalty and/or interest charges. Please note that requesting an installment agreement will not stop the accrual of these charges. You may want to consider other less costly alternatives before requesting an installment agreement.

To ensure proper handling, place this form on the top of your tax return when you mail it to the Department for processing.

If you have questions concerning this procedure, please call the Installment Unit at (404) 657-0295 or 1-877-602-8477.

MAJOR SOCIAL SECURITY #			TAXPAYER'S FULL NAME		
IF JOINT RETURN, SPOUSE'S SOCIAL SECURITY#			SPOUSE'S FULL NAME		
STREET ADDRESS				CITY	STATE
ZIP CODE	HOME PHONE NUMBER		YOUR WORK PHONE NUMBER	YOUR SPOUSE'S WORK PHONE NUMBER	
TOTAL TAX DUE SHOWN ON RETURN AMOUN		T SUBMITTED WITH RETURN	PROPOSED MONTHLY PAYMENT AMOUNT		
YOUR SIGNATURE				DATE	
YOUR SPOUSE'S SIGNATURE				DATE	

If you are currently in bankruptcy and this liability is being paid through your bankruptcy plan, DO NOT file this form.

YOU SHOULD RECEIVE A RESPONSE TO THIS REQUEST WITHIN **90** DAYS. PAYMENT COUPONS WILL BE PROVIDED UPON APPROVAL. IF YOU RECEIVE NO RESPONSE PLEASE CALL EITHER NUMBER LISTED ABOVE.

DOUBLE CHECK YOUR RETURN

Please review the following items carefully before mailing your return:

- If the mailing label is correct, place it on the form and write your social security number(s) in the appropriate area. If the label is incorrect or you do not have a label, print or type your name(s), current address (including apartment number) and social security number(s) in the space provided. If your address has changed, print or type an "X" in the change of address box. Failure to check this box could delay receipt of your refund.
- Enclose your W-2(s) and other withholding statements with the return.
- Enclose a copy of Pages 1 and 2 of your Federal return and/or Federal Schedule A, if applicable.
- If you claimed another state(s) tax credit, enclose a copy of the other state(s) tax return.
- If there is an overpayment, indicate the amount to be refunded, credited to estimated tax and/or contributed to the Nongame-Endangered Wildlife Conservation Fund, Children and Elderly in Need Fund, Greenspace Trust Fund, or Breast Cancer, Prostate Cancer and Ovarian Cancer Research Program Fund.
- Be sure to use the correct envelope for refund and payment due returns. Do not mail your Georgia return to the Internal Revenue Service.
- Mail your payment to the Georgia Department of Revenue at the address listed on the form. Write your social security number(s) and the tax year on your check or money order.

NOTE: If your return reflects a balance due of less than \$1, you do not need to send payment to the Georgia Department of Revenue. If your return reflects a refund of less than \$1, you will not receive a refund check unless a separate application is filed in duplicate on Georgia Form IT-550.

Sending your return by certified mail could delay the processing of your refund.