



State of Wisconsin • DEPARTMENT OF REVENUE

2135 RIMROCK ROAD • PO BOX 8901 • MADISON WI 53708-8901 • Phone (608) 266-7879 • FAX (608) 261-8978 • delnqtax@revenue.wi.gov

Installment Agreement Request – Processing Fee Required

The department will inform you if your installment request is approved or if additional information is needed. If approved as proposed, an installment agreement will be forwarded to you. If it is determined that larger payments are necessary or additional information is required, someone from the department will contact you. **Be sure to complete both sides of this form.**

YOUR INFORMATION

Name _____
Social Security Number _____
Date of Birth _____
Address _____
City, State, Zip _____
Phone () _____
Name(s) and ages of dependent(s) _____

Place of Employment

Company _____
Address _____
City, State, Zip _____
Phone () _____
Job Title/Position _____

Gross Income _____

Net Income ☐ Weekly ☐ Bi-weekly ☐ Monthly
\$ _____

Other Income

General Assistance \$ _____
AFDC \$ _____
Social Security/SSI \$ _____
Other (specify) \$ _____

SPOUSE INFORMATION

Name _____
Social Security Number _____
Date of Birth _____
Address _____
City, State, Zip _____
Phone () _____
Name(s) and ages of dependent(s) _____

Place of Employment

Company _____
Address _____
City, State, Zip _____
Phone () _____
Job Title/Position _____

Gross Income _____

Net Income ☐ Weekly ☐ Bi-weekly ☐ Monthly
\$ _____

Other Income

General Assistance \$ _____
AFDC \$ _____
Social Security/SSI \$ _____
Other (specify) \$ _____

PROPOSED INSTALLMENT AGREEMENT

\$ _____ { ☐ Monthly ☐ Semi-monthly ☐ Bi-weekly ☐ Weekly
OR
☐ Monthly Automatic Withdrawal (check withdrawal date) → ☐ 5th ☐ 15th ☐ 25th

/ / ← First Payment / Withdrawal Date
(mo/day/yr)

INSTALLMENT AGREEMENT TERMS:

1. A \$20.00 fee will be added to your balance when an installment agreement is accepted by the department.
2. An installment agreement will not prevent the filing of a delinquent tax warrant. These warrants are liens against your property and, as public records, may affect your credit rating. The filing of these tax warrants will add additional charges to your balance.
3. Your Wisconsin and Federal tax refunds will be used to reduce the unpaid tax liability and will not be considered installment payments on your agreement.
4. All returns and taxes must be filed and paid as they become due.
5. The Wisconsin Department of Revenue reserves the right to void any agreement if it is determined that it was made based on false or inaccurate information or if there is a material change in your financial condition.

I/We have read and understand the terms listed above and wish to enter into an installment agreement with the Wisconsin Department of Revenue.
I/We also attest that the information furnished on this form is true and correct to the best of my/our knowledge.

Your Signature	Date	Spouse Signature	Date

Please indicate both separate and combined assets and expenses.

Financial Institutions

Balance

Name and address of institution

Checking Account	\$	
Savings Account	\$	
Other (IRA, CD, Money Market, etc.)	\$	

Life Insurance Policies

Company	Beneficiary	Amount	Cash Value	Balance Due on Loan
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$

☐ Yes ☐ No Have premiums been paid to date?

Motor Vehicles

Make	Model	Year	Fair Market Value \$	Balance Due \$
License Plate #	Lien Holder	Address		
Make	Model	Year	Fair Market Value \$	Balance Due \$
License Plate #	Lien Holder	Address		

Other personal property (boat, motorcycle, snowmobile, etc.):

Real Estate (If you rent, list name and address of landlord)

Location	Fair Market Value \$	Balance Due \$
Mortgage Holder	Address	

Expenses

Monthly Payment

Balance Due

Please note any payments you are behind in and by how much

Mortgage or Rent	\$	\$	
Property tax escrow	\$	\$	
Auto payments	\$	\$	
Gasoline/oil	\$	\$	
Utilities: Home Heating	\$	\$	
Electrical	\$	\$	
Telephone	\$	\$	
Water	\$	\$	
Cable / internet access	\$	\$	
Loans (list)	1.	\$	
	2.	\$	
	3.	\$	
Credit Cards	Is card still in use?		
<input type="checkbox"/> VISA	<input type="checkbox"/> No <input type="checkbox"/> Yes	\$	
<input type="checkbox"/> MasterCard	<input type="checkbox"/> No <input type="checkbox"/> Yes	\$	
<input type="checkbox"/> Discover	<input type="checkbox"/> No <input type="checkbox"/> Yes	\$	
<input type="checkbox"/> Other:	<input type="checkbox"/> No <input type="checkbox"/> Yes	\$	
Food	\$	\$	
Entertainment	\$	\$	
Insurance (all)	\$	\$	
IRS – Delinquent Payment	\$	\$	
Other (list)	\$	\$	
Total Monthly Expenses	\$		
Total Net Monthly Income	\$		
Net Difference	\$		