

## Installment Payment Plan Request

Your Social Security num	<b>-</b> ber	<del>_</del>	- -	entification number (FEIN)		
_	_			entification number (FEIN)		
Your spouse's Social Security number			Illinois account ID			
Your first name and middle initial Last name			Legal business name:			
Your spouse's first name and middle initial Last name			Doing-business-as (DBA), assumed, or trade name, if different from the legal business name on the line above:			
Street address - No PO E	Box number	Apartment or suite number				
City		State ZIP	Business mailing ad	dress		
Your email address			City	St	tate	ZIP
()Your home phone number	<u>(</u>	ur work phone number	Name of person res	ponsible for remitting paym	ents	
	,		( )	pog pay	0.110	
Your mobile phone numb	er Yo	ur spouse's phone number	Phone number	<del></del>		
Sten 2: Describe	your deht	and installment payr	ment plan regu	ıest		
•	•					
2 Write the amount of your good faith downpayment. See ins					2 \$	
	, ,	. ,		ent plan request.	3 \$	
		debt to be covered by this plete and attach Form EG-13-I or Form				
4 Write the date of	your first insta	ıllment payment /	_/ and	d payment amount.	4 \$	
5 Check one of the	e following opt	tions to describe how often	you will make pay	ments.		
One payme	ent per month	1 1 ' '	•	1 1		ry other week
☐ Date of mo	onth	Day of week		_ L Day of w	eek	
Step 3: Provide	your financ	cial institution and ac	count informa	tion		
Financial institution's			Chec	k this box if you do not ha	ave a bank a	account.
	lame					
Mailing address			City	State	ZIP	
Name(s) on the accou	ınt (list all names)					
Routing numbe	r	·	☐ Checking	or Saving		
Find your routing number	•	ur check (for checking accounts) or contact	-	the routing number (for savin	gs accounts).	
Account number	er					
Check this box t	o authorize ACH o	debit payments from this account.				
Step 4: Read the	statement	t and sign below				
-		ois Department of Revenue (IDOR	) is authorized to use t	ne information on this fo	rm to make	withdrawals
ACH debits) at the freque	ency I selected in	Line 5 and from the account listed	on Line 6 in accordance	ce with the Department	of Revenue	Law of the Civil
		cable Illinois tax acts, and that this information about my financial cor				
lescribed above; (3) IDOI	R has the discret	tion to file a lien at any time, incl	luding, but not limited	to, when IDOR detern	nines there	is a risk of non-
		this payment plan at any address e scheduled payment, file all requi				
ayment plan, my entire u	inpaid balance wi	Il become due immediately, and ID	OR may take enforcem	nent action, including lev	y of my ban	
Inder penalties of perjury	, I state that I have	e examined this form and, to the be	est of my knowledge, it i	s true, correct, and com	plete.	
our signature or authorized office	r (if officer, write title)			Month, day, y	/	
Department use only	. , ,			,,, ,		
		//			/_	/
Approved by assignee		Date approved by assignee	Approved by supervisor		Date approve	ed by supervisor
.pp. ovod by assigned		ized as outlined under the tax or fee Act impo				by the authority of the s

See instructions on next page.

#### Instructions for Form CPP-1, Installment Payment Plan Request

#### **General Information**

#### Who should file this form?

You should file Form CPP-1, Installment Payment Plan Request, if you have tax delinquencies that you cannot pay in full because of a financial hardship and you would like to enter into an installment payment plan with us.

### What is an installment payment plan?

An installment payment plan is an agreement between you and the Illinois Department of Revenue to pay your tax delinquencies using regularly scheduled payments. Your scheduled payment amount and the length of time that you have to pay is based on your financial condition.

#### When is this form due?

There is no specific due date. We recommend that you file this form when you receive a bill or notice which you are unable to pay because of a financial hardship. Once you receive the bill or notice, you should complete and return this form within 10 days. **Note:** Even when you enter into an installment payment plan, you continue to accrue interest and applicable penalties and fees on the delinquent tax you owe.

# When will my installment payment plan request be approved?

Approval of your request for an installment payment plan will depend upon the completeness of the information you provide on this form. If additional information is needed to process your request, we will contact you.

If our review finds that you

- can pay in full, then we will require you to do so.
- qualify for an installment payment plan, we will send you a letter of

approval and the conditions of the installment payment plan.

## How must I make my installment plan payments?

ACH debit — If you have a checking or savings account, you may be required to make your installment payments using the ACH debit program. It is the recommended form of payment for installment payments. The ACH debit program allows you to have the installment payments automatically withdrawn from a savings or checking account.

**Note:** If we approve your installment payment plan request, your plan approval letter will describe the requirements for your payments.

### How must I make my first payment or extra payments?

To make your first payment or if you would like to make payments *in addition* to your regular installment payments, you may use one of the following options.

- MyTax Illinois This is the
  Department's online account
  management system. You may use
  MyTax Illinois to make electronic
  payments as well as file returns for
  most taxes. Go to mytax.illinois.gov.
- "Pay by Phone" Call
   1 866-490-2061 to make a payment from your checking or savings account. You will need your Taxpayer ID, bank routing number, and bank account number.
- Mail You may mail your remittance to INSTALLMENT CONTRACT UNIT ILLINOIS DEPARTMENT OF REVENUE PO BOX 19035 SPRINGFIELD IL 62794-9035
- Credit card (This payment method is only available for Individual Income Tax liability.) — You

may make payments using your Visa, Discover, MasterCard, or American Express. The credit card service provider will assess a convenience fee. Each service provider charges its own rate. The rates can vary daily. The Department of Revenue receives no money from these fees. Please note that this is the only payment option where you will be charged a convenience fee. To make a credit card payment, visit our website at tax.illinois.gov or call 1 866-490-2061 and choose the credit card payment option. If your payment is for a prior year, select "prior year."

## Where do I send my completed form?

Please fax your completed form to us at 217 785-2635 or mail it to

INSTALLMENT CONTRACT UNIT ILLINOIS DEPARTMENT OF REVENUE PO BOX 19035 SPRINGFIELD IL 62794-9035

#### Where do I get help?

- · Visit our website at tax.illinois.gov
- Call our Installment Contract Unit at 217 785-8556
- Write to INSTALLMENT CONTRACT UNIT ILLINOIS DEPARTMENT OF REVENUE PO BOX 19035 SPRINGFIELD IL 62794-9035

#### **Step-by-step Instructions**

#### Step 1: Debtor identification

**Line A** Complete all lines. If you have a spouse who is also liable, complete the lines about your spouse.

**Line B** If business debt, complete all lines to identify the business or organization.

# Step 2: Describe your debt and installment payment plan request

**Line 1** Identify all tax periods (*i.e.*, month, quarter, or year) for which the liability exists. For individual or business income tax liabilities, write the tax year covered by the return.

If you need additional space, write the tax period beside the line provided or list the tax periods on a separate sheet of paper and attach it to this form.

If you have both individual income tax and other tax debt, submit a separate Form CPP-1 for the individual income tax liability.

If you are requesting an installment payment plan for more than one type of tax other than individual income tax (i.e., sales, withholding, excise, or business income tax), you may combine the tax types on your Form CPP-1. Write the type of tax beside the line provided or list the tax types and periods on a separate sheet of paper and attach it to this form.

Line 2 Write the amount of your good faith down payment (which is due with your completed Form CPP-1). You must make this payment using MyTax Illinois or "Pay by Phone" payment method or by mailing us a check or guaranteed remittance. Please make your down payment amount as large as possible to reduce additional interest accrual. Interest accrues on the tax until paid.

Line 3 Write the amount of debt to be included in your installment payment plan. If your unpaid liability is over \$10,000, complete Form EG-13-I, Financial and Other Information Statement for Individuals, or Form EG-13-B, Financial and Other Information Statement for Businesses, and submit it with Form CPP-1. Both of these forms are available on our website at **tax.illinois.gov**.

Line 4 For your regular installment plan payments, write the date payments will begin and the amount of each payment. Please make the payment amount as large as possible to reduce additional interest accrual. Interest accrues on the tax until paid.

**Line 5** Check **one** box to tell us how frequently you will make your installment plan payments as identified on Line 4.

## Step 3: Provide your financial institution and account information

Complete all lines about your account. Check the box to authorize the Illinois Department of Revenue to utilize the ACH debit method of payment from this account.

### Step 4: Read the statement and sign the form

You (or in the case of a business, the person responsible for remitting payments) must sign the statement. If you do not, processing of your request will be delayed and we may take collection action to collect the unpaid debt.

We will contact you if we do not approve the installment payment plan as you request or if we need additional information from you.

### By signing the application, you agree to the following:

(1) the Illinois Department of Revenue (IDOR) is authorized to use the information on this form to make withdrawals (ACH debits) at the frequency you selected in Line 5 and from the account listed on Line 6 in accordance with the Department of Revenue Law of the Civil Administrative Code of Illinois and all applicable Illinois tax acts,

- and that this authorization remains in effect until the debt is paid or you notify IDOR in writing to cancel;
- (2) IDOR may request additional information about your financial condition and you may be required to pay a higher amount than the payment plan described on this form:
- (3) IDOR has the discretion to file a lien at any time, including, but not limited to, when IDOR determines there is a risk of non-payment;
- (4) IDOR may contact you about this payment plan at any address and phone number listed in Step 1 (this includes electronic communication by email or text); and
- (5) if you do not remit the scheduled payment, file all required returns, and pay all taxes when due, IDOR may cancel the installment payment plan, the entire unpaid balance will become due immediately, and IDOR may take enforcement action, including levy of your bank account or wages.