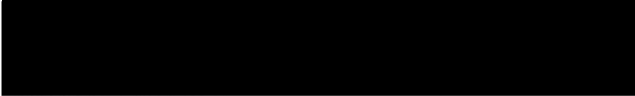




Civil Enforcement Division
W A Harriman Campus, Albany NY 12227-0841



HOOSICK FALLS NY 12090-1914

25061642508000-AA00

Authorization for automatic payment deductions for your Installment Payment Agreement (IPA)

Use this form to authorize the Tax Department to make automatic monthly deductions from your bank account as part of your IPA.

Complete all information requested on page 1 and page 2; then refer to the What to do next section on page 2 for information on how to submit this form.

1. Agreed payment schedule

Regular monthly IPA payment amount: \$7,200.00

Total number of months: 72

Modified payment(s):

Table with 3 columns: From, To, Amount due. Row 1: August 2025, June 2026, \$5,000.00

2. Payment date

Automatic deductions must be made on either the 5th or 15th of the month.

Select one (mark an X in the box): 5th [ ] 15th [X]

If you do not mark a box, we will withdraw the deductions on the 15th.

3. Bank information

Will the funds for your payment come from an account outside the U.S.?

Select one (mark an X in the box): No [X] Yes [ ]

If No, complete the remainder of the form. If Yes, STOP. Do not use this form. Banking rules prohibit us from honoring requests for electronic funds withdrawal if the funds for your payment are either located in, or were forwarded from, an account outside the United States. Therefore, you must make your payments by check or money order.

Bank name: [Redacted]

Account holder's name: [Redacted]

(Write the name exactly as it appears on the bank account you are using.)

Account type (select only one; mark an X in the box):

- personal checking [ ] personal savings [ ]
business checking [X] business savings [ ]

Routing number: [Redacted]

Account number: [Redacted]

(Verify the routing number with your financial institution.)

Signatures required on page 2

#### 4. Authorization and signatures

The account holder, through its authorized signatories below, agrees to be bound by the National Automated Clearing House Association (NACHA) operating rules which govern authorization of an electronic funds withdrawal, an Automated Clearing House (ACH) transaction, from the account identified above. The account holder hereby authorizes the New York State Department of Taxation and Finance to initiate debit entries to the bank account indicated and the bank named, and to debit the same from such 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 the account holder of its termination in such time and in such manner as to afford a reasonable opportunity to act.

Print name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: 7/23/25

Title \_\_\_\_\_

Print name: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

IPA ID: \_\_\_\_\_

#### Be sure to:

- **Verify** the account information you provided is correct.
- **Make** sure your account does not have a debit block which could prevent your payment to the Tax Department from processing.
- **Confirm** that all persons whose signatures are required to authorize an electronic funds withdrawal from the account have signed the form.
- **Keep** a copy of this agreement for your records.
- **Continue** making manual payments on your IPA until the automatic payments begin.
- **Update** us if your bank information changes at any time during the IPA.

#### What to do next

After completing the required information, fax or mail this form.

Fax: (518) 457-4420

Mail:

**NYS TAX DEPARTMENT  
CIVIL ENFORCEMENT DIVISION  
W A HARRIMAN CAMPUS  
ALBANY NY 12227-0841**

If not using U.S. Mail, see Publication 55, *Designated Private Delivery Services*.

Create an **Online Services** account and log in to electronically:

- Pay bills
- Respond to department notices
- View your account summary
- Manage account-specific email alerts and notifications

Access is available 24 hours a day, 7 days a week at:  
**[www.tax.ny.gov/online](http://www.tax.ny.gov/online)**

#### Questions?

Call (518) 457-5772



Civil Enforcement Division  
W A Harriman Campus, Albany NY 12227-0841

IPA ID: [REDACTED]

Estimated IPA  
balance due: \$ 490,566.56

Number of  
payments due: 72

Regular payment  
amount due: \$ 7,200.00

Modified payment(s)  
Month: From 08 to 06  
Year: From 25 to 26  
Amount due: \$ 5,000.00

### Installment Payment Agreement (IPA)



[REDACTED]  
HOOSICK FALLS NY 12090-1914

25061642508000-AA00

See the IPA agreement terms on the last page.

If you have questions, call: (518) 457-5434.

Below is an itemized list of liabilities included in this agreement:

Assessment ID	Tax type	Period ending	Tax due	Penalty & interest	Amount due
[REDACTED]	ST	05/31/20	\$ 26,157.56	\$ 36,264.05	\$ 62,421.61
[REDACTED]	ST	05/31/23	35,188.23	24,044.54	59,232.77
[REDACTED]	ST	08/31/20	19,509.84	25,630.90	45,140.74
[REDACTED]	ST	02/28/23	8,415.68	6,235.61	14,651.29
[REDACTED]	ST	11/30/22	0.00	3,898.78	3,898.78
[REDACTED]	ST	08/31/22	17,683.89	14,964.99	32,648.88
[REDACTED]	ST	05/31/22	33,627.95	28,986.44	62,614.39
[REDACTED]	ST	02/28/22	8,566.64	8,270.26	16,836.90
[REDACTED]	ST	08/31/21	18,861.20	21,853.04	40,714.24
[REDACTED]	ST	11/30/20	0.00	5,501.82	5,501.82
Totals			\$ 168,010.99	\$ 175,650.43	\$ 343,661.42
Less first downpayment.....					\$ 0.00
Less second downpayment.....					\$ 0.00
Plus estimated additional penalty & interest accruing during the term of the IPA.....					\$ 146,905.14
<b>Projected IPA balance due (as of 07/15/2025).....</b>					<b>\$ 490,566.56</b>

*Subject to modification*