



Form CD-410
Settlement
Agreement Offer

Entity Type of Taxpayer Individual(s) Proprietorship Partnership LLC Corporation

Taxpayer Name Taxpayer ID / License No.

Mailing Address

City State Zip Code

Daytime Telephone Number New Address? Yes No

This offer is submitted to settle a liability resulting from failure to pay a New Hampshire tax administered by the Department of Revenue Administration as follows (Please enclose a copy of any Notices of Assessment):

	Owed	Offer
Interest and Dividends Tax	\$ <input type="text"/>	\$ <input type="text"/>
Business Tax (Business Profits / Business Enterprise Tax)	\$ <input type="text"/>	\$ <input type="text"/>
Meals and Rentals Tax	\$ <input type="text"/>	\$ <input type="text"/>
Other (Specify) <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

Gross income during past 12 months \$

Gross wages paid during past 12 months \$

Monthly Expenses:

Rent	\$ <input type="text"/>	Mortgage	\$ <input type="text"/>
Utilities	\$ <input type="text"/>	Vehicles	\$ <input type="text"/>
Advertising	\$ <input type="text"/>	Insurance	\$ <input type="text"/>
Other (Specify) <input type="text"/>			\$ <input type="text"/>

Assets:

Cash on Hand (Enclose two most recent monthly bank statements for each account):

Bank 1: \$

Bank 2: \$

Bank 3: \$

Money Market Accounts \$

Receivables (Description) \$

Inventory (Description) \$

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Assets (continued):

Investments (Description) \$

Business Equipment (Description) \$

Real Estate 1 Address Market Value \$

Real Estate 2 Address Market Value \$

Real Estate 3 Address Market Value \$

Liabilities:

Taxes due (Other State Agencies, IRS, Real Estate Taxes, etc.) \$

Credit Card Debt/Accounts Payable \$

Loans owed to banks \$

Real Estate Mortgages \$

Available Credit Credit Line \$ Balance \$

In addition to Bank Statements:

Business Taxpayers: Please enclose your most recent Financial Statements

Individuals: Please enclose a copy of your most recent Federal 1040 tax return as filed with the Internal Revenue Service

Please describe the circumstances which resulted in the inability to pay the taxes due in full:

Under penalties of perjury, I declare that I have examined this offer, including accompanying schedules and statements, and to the best of my knowledge and belief the information is true, correct and complete.

Signature _____ Date _____

Print Name _____ Title _____

Please complete the requested information and mail to:
 NHDRA
 Collections Division
 PO BOX 454
 CONCORD, NH 03302-0454