REQUEST FOR WAIVER OF PENALTIES

Taxpayer ________________________________________________________________

Account number __________________________________________________________

Tax ______________________________________________________________________

Period(s) __________________________________________________________________

Type of Penalty:  □ Delinquent  □ Negligence  □ Audit Fees  □ ___________________

Penalty Penalty

I hereby assert that the delinquency in filing the subject return and/or paying the subject tax was not due to my intent to violate the law, but was due to the following reason(s):

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Pursuant to the provisions of Louisiana Revised Statute 47:337.71 and based on the causes described in the preceding paragraph, request is hereby made that the penalties of $____________ incurred under the provisions of R. S. 47:337.70 be waived.

Under the penalty of perjury, I declare all of the facts alleged above as a basis for reasonable cause, to the best of my knowledge and belief, including all accompanying documentation, are true, correct, and complete.

________________________________________

Taxpayer Signature

Date ________/______/______

________________________________________________________________________

________________________________________

(Official Title if Acting for a Corporation)

Approved By (Parish Official)