CITY OF PHILADELPHIA
DEPARTMENT OF REVENUE

PETITION FOR WAIVER OF COMBINED INTEREST AND PENALTY UNDER $10,000.00

For waiver of combined interest and penalty over $10,000, call the Tax Review Board at 215-686-5216 or download the form from www.phila.gov/trb

CLEARLY PRINT OR TYPE ALL INFORMATION.

PETITIONER'S NAME *(First Name, Middle Initial, Last Name)*		**ACCOUNT NUMBER**	
BUSINESS NAME		**SOCIAL SECURITY NUMBER**	
MAILING ADDRESS		**FEDERAL EMPLOYER IDENTIFICATION NO.**	
CITY		**STATE**	**ZIP CODE**
PHONE NUMBER	**FAX NUMBER**	**E-MAIL ADDRESS**	

LIST TYPE OF TAX OR CHARGE, THE PERIOD COVERED AND INDICATE THE AMOUNT OF INTEREST & PENALTY PETITIONED FOR WAIVER.

TAX TYPE	PERIOD/YEAR	INTEREST	PENALTY	TOTAL
GRAND TOTALS				

REASON FOR THIS PETITION *(Be brief and concise. Do not use reverse - attach additional sheets, if necessary, to the back of this petition.)*

I HEREBY CERTIFY that the statements contained herein and in any supporting schedule or exhibit are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statements herein, I am subject to penalties as prescribed by law.

PETITIONER'S SIGNATURE	**DATE**

DEPARTMENT OF REVENUE USE ONLY	DEPARTMENT OF REVENUE USE ONLY
	REVIEWED BY DATE
TERMS	SUPERVISORY APPROVAL DATE

MAIL COMPLETED PETITION TO:
CITY OF PHILADELPHIA
DEPARTMENT OF REVENUE
1401 JOHN F. KENNEDY BOULEVARD
PHILADELPHIA, PA 19102
OR FAX TO: 215-686-6635

DEPARTMENT OF REVENUE
CONTACT INFORMATION:
PHONE: 215-686-6600
E-MAIL: revenue@phila.gov
INTERNET: phila.gov/revenue

(Rev. 10-14-2005)