



**pennsylvania**  
DEPARTMENT OF REVENUE  
BUREAU OF COMPLIANCE  
PO BOX 280948  
HARRISBURG PA 17128-0948

## LIEN PAYOFF REQUEST FORM

**Taxpayers or their representative must use this form to request a payoff balance to resolve a tax lien.**  
**How to file: Submit a completed form by email to [ra-compenforfaxes@pa.gov](mailto:ra-compenforfaxes@pa.gov) or fax to: (717) 772-5045.**

### INSTRUCTIONS

- A.) PLEASE COMPLETE ALL NINE ITEMS BELOW.
- B.) If you do not have the requested information, please obtain a copy of the lien from the county courthouse in which it was filed to find the correct information. If the lien to be resolved was filed prior to 2009, a copy of that lien must accompany this form.
- C.) The payoff date is the date the check will be postmarked.
- D.) The Taxpayer ID number is either the Social Security number, the federal employer identification number, sales and use tax number, or the Revenue Identification number. All digits of the Taxpayer ID number must be provided to complete your request.
- E.) Please allow five business days before inquiring about the status of your request.
- F.) If you need an updated payoff request, please complete a new request. Please do not send your old payoff letter.

### REQUESTER'S INFORMATION

1. Requester Name

Street Address

City

State

ZIP Code

2. Type of tax a payoff is being requested for:

- Inheritance Tax/Other     Personal Income Tax     Sales and Use Tax     Employer Tax     Corporation Tax

### TAXPAYER(S) INFORMATION

3. Taxpayer(s) Name(s)

4. Taxpayer(s) ID Number(s)

5. Docket Number(s)

6. Payoff Date

### CERTIFICATION

7. Your Name

8. Phone Number

9. Fax Number