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(October 2012) Withdrawal of Request for Collection Due Process or Equivalent Hearing

Taxpayer	name(s)
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Taxpayer address		
City	State	Zip code
Type of tax/tax form*		
Tax period(s)*		
Social Security/Employer Identification Number(s)*		
*Note: You may attach a copy of your Collection Due Process no and identification number in the spaces above.	vtice to this form instead of listing the	e tax type/form number/period
I've reached a resolution with the Internal Revenue Service (IRS) re or I am otherwise satisfied that I no longer need a hearing with the 0 request under (check all that apply):		
IRC Section 6320, notice and opportunity for a hearing up	oon the filing of a Notice of Feder	al Tax Lien
IRC Section 6330, notice and opportunity for a hearing be	efore a levy	
Both IRC Section 6320 and 6330 notices		
Equivalent Hearing		
 I understand that by withdrawing my request for a Collection D I give up my right to a hearing with Appeals. I understan respect to the tax and tax periods subject to the hearing that all legal and administrative requirements were met. Appeals will not conduct this verification. I give up my right to seek judicial review in the Tax Coun issued as a result of the CDP Hearing, as Appeals will n I give up my right to have Appeals retain jurisdiction with result of the CDP Hearing. The suspension of levy action and the suspension of the under the provisions of IRC Sections 6320 and 6330, ar withdrawal. I do not give up any other appeal rights that I am entitled Program (CAP). 	In that Appeals will not issue a New request. As part of a CDP detern I understand that by withdrawing rt of the Notice of Determination the not issue a Notice of Determination in respect to any determination the e statute of limitations on the peri- re no longer in effect upon the reco d to, such as an appeal under the	otice of Determination with mination, Appeals verifies g my hearing request, that Appeals would have on. at it would have made as a fod of collection, as required ceipt by the IRS of this
 I understand that by withdrawing my request for an equivalent I give up my right to a hearing with Appeals. I understand that tax periods subject to the hearing request. I do not give up any other appeal rights that I am entitled to, so 	Appeals will not issue a Decision Le	
Taxpayer's signature		Date
Spouse's signature (if applicable)		Date
Authorized Representative signature (if applicable)		Date

For privacy Act information please refer to Notice 609