



## Request for Abatement of Interest

Louisiana Department of Revenue  
 Individual Tax Submission: [Income.Tax@LA.gov](mailto:Income.Tax@LA.gov)  
 Business Tax Submission: [Business.Tax@LA.gov](mailto:Business.Tax@LA.gov)

Individual       Business

**PLEASE PRINT OR TYPE**

|               |                  |                                 |
|---------------|------------------|---------------------------------|
| Taxpayer Name |                  | LDR Account Number              |
| Tax Type      | Filing Period(s) | Amount of Interest to be Abated |
| Email Address |                  |                                 |

Louisiana Revised Statute 47:1601(A)(2)(c) provides that the secretary may abate all or any part of interest for any period if the assessment of interest is attributable, in whole or in part, to any unreasonable error or delay by the secretary or a designee acting in an official capacity in the performance of a ministerial or managerial act as defined in Louisiana Administrative Code 61:III.2115.A. The request to abate the interest will be considered only if no significant part of the error or delay can be attributed to the taxpayer involved.

Request is hereby made for the abatement of interest based on the following reasons:

|   |                   |
|---|-------------------|
| Under penalty of perjury, I declare all of the facts provided above as a basis for an abatement, to the best of my knowledge and belief, including all accompanying documentation, are true, correct, and complete. |                   |
| Taxpayer's Authorized Representative  | Title             |
| Signature of Authorized Representative  | Date (mm/dd/yyyy) |
| Authorized Representative's Email Address   |                   |

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|                                   |                                      |                           |
|-----------------------------------|--------------------------------------|---------------------------|
| <input type="checkbox"/> Approved | <input type="checkbox"/> Disapproved | Amount of Interest Abated |
| Department Representative         |                                      | Approval Date             |