



## **Installment Payment Agreement**

Approved OMB 1212-0055 Expires

Plan Name: «PrismCase.CaseTitle» Plan Number: «PrismCase.CaseIdNmbr» Date Printed: 02/04/2021 Date of Plan Termination: «PrismCase.DOPT»

Participant Name: «PrismCust.FullName»

## 1. General information about you (Print clearly with dark ink)

Last Name	First Name	
Middle Name	Other Name(s) Used	
Cocial Cocyrity Number -	Pata of Dirth Condor	
Mailing Address	Anartment / Route Number	
City	State Zin Code	
Country	Email (ontional)	
Dating Phan	EXTENSION SUCCESSION STATEMENT	

INSTRUCTIONS: If you want to pay your debt in installments, please sign the agreement on the next page and send it to:

Collections and Compliance Division / PIU, FOD Pension Benefit Guaranty Corporation 1200 K Street, NW, Suite 670 Washington, DC 20005

The agreement may not be altered in any manner. After you sign and return the agreement, PBGC will sign and return a copy of this agreement to you, with instructions concerning your monthly payments. Each month's payment will be due on the first day of the month, beginning on the first of the month following the date PBGC executes the agreement and returns it to you.



Participant Name: «PrismCust.FullName»

## 2. Installment Payment Agreement

I acknowledge that I owe the Pension Benefit Guaranty Corporation (PBGC) a debt for pension benefits that I received, but was not entitled to receive. The amount of this debt is entered below. In exchange for PBGC's agreement to not demand payment at once of the entire amount of this debt or to take legal or other collection actions, I agree to make monthly payments in the amount indicated below until my debt is fully paid.

No interest will accrue on the balance while I continue to make timely installment payments. However, I understand that PBGC may declare me to be in default 60 days after a missed payment, and that simple interest will then accrue on the total remaining unpaid balance at the same rate as the U. S. Treasury Department's Current Value of Funds Rate for the month in which the first payment was missed. If interest accrues, my payments will first be applied to outstanding interest, then to reduce the principal amount.

In addition, I understand that PBGC may take legal or other collection actions. When an installment payment is 90 days late, PBGC may forward the debt to the U.S. Treasury Department for debt collection action, including tax refund offset, Social Security benefit offset, and/or wage garnishment.

Total debt:	\$			
Monthly payment	\$	for	months	
PBGC Tracking number:				
By signing this form, I agree	to the terms set for	orth in th	is agreement.	
Signature		Date		
Terms accepted by PBGC:				
Signature of FOD Collections Official		Date		
Drinted Name of FOI	Collections Office	ial	_	
Printed Name of FOI	J Collections Offic	ıaı		