

**SAMPLE DEBTOR NOTIFICATION LETTER**

January 1, 2003

Mr./Ms. \_\_\_\_\_  
 2001 Smithway Avenue  
 Anywhere, NC 29999

RE: Notice of Debt Owed to the local agency of \_\_\_\_\_  
 Intention to setoff debt  
 Mr./Ms. \_\_\_\_\_

Dear Mr./Ms. \_\_\_\_\_:

*(For a single debt of \$50 or more)*

Our records indicate that you owe the following past due amount to the local agency of \_\_\_\_\_

<b>Explanation of Debt</b>	<b>Bill Date</b>	<b>Date Past Due</b>	<b>Past Due Amount</b>
Water Service	December 2, 2001		\$76.55
Interest (12 mos)	December 2, 2002		4.59
<b>Total Debt</b>			<b>\$81.14</b>

*(For two or more debts, each of \$50 or more)*

Our records indicate that you owe the following past due amounts to the local agency of \_\_\_\_\_

<b>Explanation of Debt</b>	<b>Bill Date</b>	<b>Date Past Due</b>	<b>Past Due Amount</b>
Water Service	December 2, 2001		\$76.55
Interest (12 mos)	December 2, 2002		4.59
<b>Total Debt</b>			<b>\$81.14</b>

<b>Explanation of Debt</b>	<b>Bill Date</b>	<b>Date Past Due</b>	<b>Past Due Amount</b>
Em. Medical Services	December 2, 2001		\$50.00
Interest (12 mos)	December 2, 2002		3.00
<b>Total Debt</b>			<b>\$53.00</b>

***(For two or more debts that exceed \$50 when combined)***

Our records indicate that you owe the following past due amounts to the local agency of \_\_\_\_\_

<b>Explanation of Debt</b>	<b>Bill Date</b>	<b>Date Past Due</b>	<b>Past Due Amount</b>
Water Service	December 2, 2001		\$15.00
Interest (12 mos)	December 2, 2002		.90
Total Debt			\$15.90

<b>Explanation of Debt</b>	<b>Bill Date</b>	<b>Date Past Due</b>	<b>Past Due Amount</b>
Em. Medical Services	December 2, 2001		\$20.00
Interest (12 mos)	December 2, 2002		1.20
Total Debt			\$21.20

<b>Explanation of Debt</b>	<b>Bill Date</b>	<b>Date Past Due</b>	<b>Past Due Amount</b>
Parking Violation	December 2, 2001		\$25.00
Interest (12 mos)	December 2, 2002		1.50
Total Debt			\$26.50

As authorized by North Carolina General Statutes, Chapter 105A-2 (6), The Setoff Debt Collection Act (the "Act"), the local agency of \_\_\_\_\_ intends to submit the above \_\_\_\_\_ (*debt/debts*) to the North Carolina Department of Revenue for collection by applying the \_\_\_\_\_ (*debt/debts*) against any income tax refund in excess of \$50 that you may be entitled to receive. Additionally, as authorized by North Carolina General Statute 18C-134, if applicable, the local agency intends to submit the above \_\_\_\_\_ (*debt/debts*) against certain lottery prizes to which you may become entitled.

***(Choose the appropriate paragraph or modify accordingly if other combinations apply)***

***(For a single debt of \$50 or more)***

Additionally, you are further advised that in accordance with the Act, a local collection assistance fee of \$15 will be added to the obligation or account described above if it is submitted for set off.

***(For two or more debts, each of \$50 or more)***

Additionally, you are further advised that in accordance with the Act, a local collection assistance fee of \$15 will be added to each obligation or account described above if it is submitted for set off.

***(For two or more debts that exceed \$50 when combined)***

Additionally, you are further advised that in accordance with the Act, a local collection assistance fee of \$15 will be added to the obligations or accounts described above if they are submitted for set off.

You have the right to contest this action by filing a written request for a hearing with the local agency of \_\_\_\_\_. Your request must be filed at the following address no later than 30 days from the postmarked date of this letter. Your request for hearing may be filed within the specified time by delivering it to the local regional agency office or by delivering it for mailing with postage prepaid and properly addressed to the local agency at the following address.

Local agency of \_\_\_\_\_  
PO Box 500  
Anywhere, NC 29999

Failure to request a hearing within the 30 days time limit will result in the setoff of the above debt, and the addition of the applicable local collection assistance fee.

Yours truly,

\_\_\_\_\_  
(Name and position)

Cc: \_\_\_\_\_, Debt Setoff Officer