

**North Carolina Local Government Debt Setoff Clearinghouse
Required Notification Letter - Instruction Guide**

TIPS:

-) Debt must be 60 days delinquent prior to sending a notification letter
-) Send to last known address, regular mail, certified mail not required
-) Must be on local government letterhead, not a third-party vendor
-) Can combine debts to meet \$50 minimum
-) Only need to send letter once, regardless of additional fees and/or interest that may accrue to debt(s) listed on the letter
-) Recommendations:
 - o separate letter recommended for each department
 - o printing a copy for file, in the event a person in the future requests a copy of the original letter
 - o Save returned letters in accordance with retention requirements

GUIDE FOR ALL VARIABLES WITHIN LETTER:

1. Date Being Mailed:

- a. Today's date: Month, Day and Year when the letter is to be printed and mailed:
 - i. The debtor has 30 days from the date letter was mailed to:
 - 1. request an appeal
 - 2. pay the debt in full
 - 3. work out an agreeable payment plan

2. Debtor Name:

- a. Include middle initial and suffix, if available

3. Debtor Address:

- a. Last known address, even if known no longer at that address

4. Local Government:

- a. County, Municipality or Agency name.
- b. Recommend appending a specific department
 - i. Examples:
 - 1. City of Charlotte Finance
 - 2. Mecklenburg County Tax
 - 3. Cape Fear Public Utility

5. Total Debt Amount:

- a. Total delinquent debt amount owed to this local government
 - i. Recommend total amount for one department

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6. Debt Type or Department:

- a. Examples:
 - i. TAX
 - ii. Utilities
 - iii. Emergency Services (EMS)
 - iv. Health

7. Debt Amount:

- a. **List individual debt(s) that equal the Total Debt Amount**

8. Local Government Name and Address:

- a. Mailing address for debtor hearing request

9. Local Government Contact Person:

- a. List an individual (first and last name)
- b. Does not have to be the Hearing Officer, the contact can accept the official hearing request and provide to the Hearing Officer

10. Local Government Contact Person:

- a. Give direct line number, with extension

11. Local Government Official's name:

- a. List an individual (first and last name)
- b. Can be the same person as the Local Government Contact Person

12. Local Government Official's title (optional)