Form **14135** (November 2024)

Department of the Treasury - Internal Revenue Service

Application for Certificate of Discharge of Property from Federal Tax Lien

OMB Number 1545-2174

Complete the entire application. Enter NA (not applicable), when appropriate. Attachments and exhibits should be included as necessary. Additional information may be requested of you or a third party to clarify the details of the transaction(s).

1. Taxpayer information (individual or busin	ess named on the notice	e of lien)			
Name (individual first, middle initial, last or business) as it appears on notice of lien			Primary Social Security number		
Name continuation (individual first, middle initial, last or business d/b/a)			Secondary Social Security number		
Address (number, street, P.O. box)			Employer identification number		
City		State		ZIP code	
elephone number (with area code) Fax number (with area code)		Fax number (with area	area code)		
2. Applicant information	Check if also	the taxpayer (if not the	taxpayer, attach copy of	lien. See Sec. 10)	
Name (first, middle initial, last)			Relationship to taxpa	ayer	
Address (number, street, P.O. box)					
City		State		ZIP code	
Telephone number (with area code)		Fax number (with area code)			
3. Purchaser/Transferee/New Owner	Check if also	the applicant			
			Relationship to taxpayer		
4. Attorney/Representative information	Attached: Form 8	821 or Power of Attorn	ney Form 2848	Yes No	
Name (first, middle initial, last)			Interest represented (e.g. taxpayer, lender, etc.)		
Address (number, street, P.O. box)					
City		State		ZIP code	
Telephone number (with area code)		Fax number (with area code)			
5. Lender/Finance company information -	(or settlement/escrov	v company for applica	ations under section	6325(b)(3) only)	
Company name	Contact name		Contact telephone number		

6. Monetary inform	ation				
Proposed sales price	е				
Expected proceeds proceeds are anticipate	to be paid to the United States in exchange for ted)	the certificate of discharge	(Enter 0.00 if no		
7. Basis for discha	rge				
	w that best addresses what you would like the Us additional descriptions of the Internal Revenue			or discharge.	
6325(b)(1)	Value of property remaining attached by the lien(s) is at least double the liability of the federal tax lien(s) plus other encumbrances senior to the lien(s)				
6325(b)(2)(A)	The United States receives an amount not less than the value of the United States' interest. (Note: If you are applying under 6325(b)(2)(A) and are the property owner but not the taxpayer, see also section 16)				
6325(b)(2)(B)	Interest of the United States in the property to be discharged has no value				
6325(b)(3)	Proceeds from property sale held in escrow subject to the liens and claims of the United States				
6325(b)(4)	Deposit made or bond furnished in an amount equal to the value of the United States' interest. (Note: This selection provides a remedy under 7426(a)(4) for return of deposit but is exclusively for a property owner not named as the taxpayer on the notice of lien)				
Address of real pro	pperty (if this is personal property list the address wh	nere the property is located)			
Address (number, stre	eet, P.O. box)				
City		State		ZIP code	
For real estate A legible copy of the	e deed or title showing the legal description is re	quired	Attached	□ N/A	
•	nests under section 6325(b)(1) itle(s) for property remaining subject to the Federal	eral Tax Lien is required	Attached	□ N/A	
9. Appraisal and va	aluations				
Required appraisal	(professional appraisal completed by a disinterested	third party)		Attached	
PLUS one of the foll	lowing additional valuations				
County valuation of	property (real property)			Attached	
Informal valuation of	f property by disinterested third party			Attached	
Proposed selling price	ce (for property being sold at auction)			Attached	
Other				Attached	
	s under Section 6325(b)(1), valuation information subject to the lien.	n (of the type described ab	oove in this section) must also be provided	

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10. Copy of federal tax lien(s) (complete if ap	plicant and taxpayer differ)	Attached	☐ No
OR list the serial number(s) found near the to	p right corner on the lien document(s) (if known)		
11. Copy of the sales contract/purchase a	greement (if available)	Attached	☐ No
OR			
Describe how and when the taxpayer will be	divested of his/her interest in the property		
12. Copy of a current title report		Attached	No
OR		_	_
	Lien. Include name and address of holder; desc		
state lien, etc.; date of agreement; original loa applicable <i>(attach additional sheets as needed</i>	an amount and interest rate; amount due at time	of application; and f	family relationship, if
<u> </u>			
13. Copy of proposed closing statement (a	aka HUD-1)	Attached	□ No
OR			
	expenses of any transfer or sale associated wit	h property (attach a	dditional sheets as
needed)			
14. Additional information that may have a	hearing on this request, such as pending	Attached	□ No
litigation, explanations of unusual situation		Attached	
15. Escrow agreement (for applications under	IRC 6325(b)(3))	Attached	□ No
Escrow agreement must specify type of a	ccount, name and depositary for account,		
party identified as part of escrow agreement	lade, cost of escrow, name and address of any ent, and signatures of all parties involved		
including Advisory Group Manager. Term	s for agreement must be reached before		
discharge approved.			
16. Waiver (for applications made by third parties If you are applying as an owner of the pro	under IRC 6325(b)(2)) perty and you are not the taxpayer, to have this	application conside	red under section
6325(b)(2), you must waive the rights that	would be available if the application were made	under section 6325	5(b)(4). If you choose
deposit under that section. Check the app	will be treated as one made under 6325(b)(4) and propriate box.	d any payment will t	be treated like a
	ayment made under section 6325(b)(2) does r	not provide the jud	icial remedy
available under section 7426(a)(4). In n	naking such an application/payment, I waive t	the option to have	the payment treated
7426(a)(4).	and the right to request a return of funds and	Waive	No No
17. Declaration			
	ve examined this application, including any accor	mpanying schedule	s exhibits affidavits
	dge and belief it is true, correct and complete.	mpanying concadio	o, oxinono, amaavito,
Signature	Title (if business)		Date
Signature	Title (if business)		Date