

Application for Waiver of Tax
Discharging Property Subject to Estate Tax Lien

Complete this application and mail to:
Estate Tax Unit, Arizona Department of Revenue, 1600 West Monroe, Room 520, Phoenix, AZ 85007-2650
For assistance, call (602) 716-6439, or toll-free from area codes 520 and 928, call (800) 352-4090, or
Visit our web site at www.azdor.gov

NAME OF DECEDENT (LAST, FIRST, MIDDLE INITIAL) DATE OF DEATH DECEDENT'S SOCIAL SECURITY NO.
M M D D Y Y Y Y
DECEDENT'S LEGAL RESIDENCE (DOMICILE) AT TIME OF DEATH (CITY, COUNTY, STATE, ZIP CODE)

As provided by Arizona Revised Statute §42-4008, I apply for a waiver of tax discharging property subject to an estate tax lien. This property belongs to, or forms a part of, the gross estate of the decedent named above.

Has Form 706 been filed? YES NO If "Yes", date form was filed: M M D D Y Y Y Y

Has Form 76 been filed? YES NO If "Yes", date form was filed: M M D D Y Y Y Y

List the gross estate values as reported on federal Form 706. If Form 706 has not been filed, show approximate amounts:

Table with 3 columns: Asset, Arizona, Other than Arizona. Rows include Real Estate, Stocks and Bonds, Mortgages, Notes and Cash, Insurance on Decedent's Life, Transfers During Decedent's Life, Powers of Appointment, Annuities, Other Miscellaneous Property, and TOTAL GROSS ESTATE.

Is the property or properties for which a waiver is requested being sold, transferred or mortgaged? YES NO

Attach an appraisal or notice of valuation for each parcel of real estate for which a waiver is requested.

Are you going to make a request or was your request already granted for an extension of time to file a federal estate tax return and/or an Arizona estate tax return? YES NO

I declare under the penalties of perjury that I have examined this application and that, to the best of my knowledge and belief, the statements made herein and attached are true and correct.

Personal Representative/Surviving Joint Tenant/Attorney

TYPE OR PRINT NAME SOCIAL SECURITY OR FEDERAL EMPLOYER I.D. NUMBER

STREET ADDRESS CITY, STATE, ZIP

SIGNATURE OF REPRESENTATIVE DATE TELEPHONE (WITH AREA CODE)