

Non-Standard Settlement Request

Please complete application thoroughly. Incomplete applications are subject to denial.

Violator's Name: _____ License Plate(s): _____

Violator's Address: _____ City, State Zip: _____

Violator's Telephone Number: _____ Total number of persons in household: _____

Amount owed: TOTAL: \$ _____ Amount Previously Paid \$ _____

Do you have an IPASS account? _____ If yes, what is the account number? _____

Why did the violations occur? _____

What is the reason a hardship/payment plan is needed? _____

Have you filed bankruptcy? _____ If yes, Case # _____. Subject to Stay: Yes or No

Violator's Monthly Income: \$ _____ (Attach copy of pay record or Federal tax return)

Spouse/Family Member/Household Member or Government Benefits Monthly Income \$ _____

Assets: Total: \$ _____

-Checking/Saving Accounts: \$ _____ (Attach copy – NOT originals)

-House (Circle: Own or Rent) Value \$ _____ Owe: \$ _____

-Car Value \$ _____ Owe \$ _____

Liabilities: Total: \$ _____ (Do not attach originals)

-Monthly Expenses:

Housing: \$ _____ Car: \$ _____ Electricity: \$ _____ Gas \$ _____

Other Expenses: _____ \$ _____; _____ \$ _____

-Medical: \$ _____.

Violator's Proposed Settlement:

How much can you pay each month? _____ OR How much can you pay within 60 days? _____
Please do not enter \$0; if no payment amount is listed or satisfactory, an amount will be determined for you.

How will this amount be paid? (savings, credit card, or borrowed from third party) _____

Under penalties of law, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Violator's Signature _____ Date: _____

Illinois Tollway: Attention Customer Service

Mail **COMPLETED** application with supporting documentation to:

2700 Ogden Avenue

Downers Grove, IL 60515

To be completed by Tollway

Tollway's Settlement Offer: \$ _____ Recommending Supervisor: _____

Assistant Attorney General: _____ Approved: Yes or No – Amount \$ _____