

Revenue Recapture Act Certification and Decertification and Modification Request

Individual(s)	Individual(s) Being Certified			
	First Name	Initial	Last Name	Social Security Number
	Spouse's First Name <i>(if filing a joint claim)</i>	Initial	Last Name	Social Security Number
	Last Known Address	City	State	ZIP Code
	Date of Birth	Spouse's Date of Birth <i>(if filing a joint claim)</i>		

Agency	Certifying Agency			
	Agency Name			Minnesota Tax ID Number
	Address	City	State	ZIP Code
	Agency Contact Person			Daytime Phone Number ()

Liability	Liability			
	Amount of Liability	Date of Debt	Agency Account Number	Is liability for criminal restitution? <input type="checkbox"/> Yes <input type="checkbox"/> No

To cancel or update	Decertification or Modification Request <i>(leave blank if you are not cancelling or updating an existing claim)</i>		
	Check one box only <i>(if applicable)</i> : <input type="checkbox"/> To cancel the claim <input type="checkbox"/> To update the claim	If you are updating an existing claim: Enter change to claim (+ or -):	

Mail completed form to: Minnesota Department of Revenue, Collection Division, 600 North Robert St., St. Paul, MN 55146 or fax to: 651-556-5120. Be sure to keep a copy for your records.

Instructions

Agency Name

You must provide the state agency or county name. Do not use a generic name such as "Accounting" or "Child Support Collections" without identifying the agency to which the office belongs.

Minnesota ID Number for Revenue Recapture Purposes

Before you can participate in the recapture program, the agency must have an assigned Minnesota tax ID number that is authorized for recapture purposes only. Call 651-556-3037 to apply for one.

Liability

The debt must be a minimum of \$25 and may include criminal fines.

Agency Account Number (optional)

Please assign each account a 1- to 9-digit numeric number.

The account number is an optional field for use in recording a case number or other type of identifying number that an agency may have assigned to a debt.

This number will appear on reports of setoffs.

Claims are in effect until paid or canceled.

The agency must notify the department within 30 days after the debt has been satisfied or reduced by at least \$200.

To cancel or update claims filed, complete the "Decertification or modification request" area on a copy of the original claim filed with the department.

Questions?

If you have questions regarding the revenue recapture program, you can call the department at 651-556-3037 or fax your questions to 651-556-5120.