

# United States Department of Agriculture (USDA) Centralized Receivables System (CRS)/Cross-Servicing Next Generation (CSNG) Agency Waiver Resolution Form

Financial Management Services (FMS) and USDA agencies must complete this form when an employee has requested a waiver for their relocation-related indebtedness. Refer to form instructions for guidance.

## Section 1: Bill Information

To Be Completed by FMS

- 1) Debtor's Name (first, middle initial, last, suffix):
- 2) Agency:
- 3) Agency Debtor ID:
- 4) Travel Authorization Number:
- 5) Amount Paid                      Full      Partial
- 6) Waiver Reason:
  - Validity of Receivable
  - Validity of Receivable Amount
  - Validity of Fees
- 7) Waiver Initiated By:
  - Debtor
  - A Congressional Inquiry
  - Wrong Debtor
  - Other
- 8) Additional Information.

## Section 2: Waiver Decision

To Be Completed by Agency

After reviewing agency records and any documentation provided by the requestor, select the agency decision based on the waiver reason in Section 1, field 6.

### **Reason 1: Validity of Receivable – No Payments Submitted.**

The receivable is invalid.

Agency agrees. Entire debt is invalid.

Agency agrees. Debt is valid but agrees to waive debt pursuant to DR 2570-002.

Agency agrees (partial). Debt is valid but requires financial adjustment.

Agency disagrees. Debt has been verified and is valid.

### **Reason 2: Validity of Receivable Amount – Partial/Full Payment Submitted**

The receivable amount is incorrect.

Agency agrees. Payment evidence satisfies the full balance of the invoice.

Agency agrees (partial). Payment evidence satisfies partial balance of the invoice.

Agency disagrees. Payment evidence does not affect this invoice.

**Reason 3: Reimbursement of Fees – Debt Paid in Full**

The fees are invalid.

Agency agrees. Principal is valid and fees will be reimbursed.

Agency disagrees. Principal and fees are valid.

**Explanation of Waiver Decision**

Comment Required. The requestor will be given this information. Avoid terminology the debtor may not understand.

**Agency Signature**

Approving Official's Printed Name:

Approving Official's Signature:

Date:

## Form AD – xxxx Instructions

Use the following instructions to complete the AD – xxxx.

### Who must use this form?

FMS and USDA agencies must complete this form when an employee submits a waiver request regarding their Travel Relocation Negative Relocation Income Tax Allowance (RITA) or Tax Liability Bill via the CRS or CSNG system.

### Getting Started:

When an employee submits a waiver request, the agency must respond by selecting the applicable decision reason. There are three reasons why an employee may submit a waiver request:

- Employee disputes the validity of the receivable (bill).
- Employee disputes the validity of the receivable amount.
- Employee agrees with the receivable amount but requests a waiver of fees.

The debt will be placed on hold, pending the agency's response.

## Section 1: Bill Information

### Instructions for FMS

Record the bill information from the waiver request submitted in the CRS or CSNG system:

- 1) Enter the employee's full name.
- 2) Enter the agency's acronym.
- 3) Enter the employee's agency debtor ID.
- 4) Enter the debtor's travel authorization number.
- 5) Select the appropriate box to indicate if payments fulfilled the bill partially or in full.
- 6) Waiver Reason: Select why a waiver is being requested.
  - Validity of Receivable – payments have not been made, and the requestor states that the bill is not valid.
  - Validity of Receivable Amount – payments have been made but the requestor states that the principal amount is incorrect.
  - Reimbursement of Fees -a full payment has or has not been made, but the requestor disputes the fees: interest, penalty, and administrative charges.
- 7) Waiver Initiated By: Select who initiated the request. -
  - Debtor: Select if the debtor initiated the request.
  - A Congressional: Select if the request was initiated based on a Congressional inquiry.
  - Wrong Debtor: Select if the request was submitted because the bill was sent to the wrong person. Enter bill recipient's name.
  - Other: Select if the request was initiated by other than the above.
- 8) Additional Information: Enter pertinent information to assist in the agency's decision.

## Section 2: Waiver Decision

### Instructions for Agency with Corresponding Action by FMS

Select a decision based on section 1, field 6 (Waiver Reason), by indicating if the agency agrees, partially agrees, or disagrees. Return the completed and signed form by *replying to all* within 14 business days of receipt.

#### **Reason 1: Validity of Receivable (Bill) – No Payments Submitted**

**Agency Agrees.** Select this decision if the agency determines, based on an independent review, that the bill is not valid and should be cancelled.

**FMS will:**

- confirm the decision and adjustment.
- cancel the bill in FMMI and CRS/CSNG.
- enter corresponding action in the relocation system.
- record the decision in CRS/CSNG and select, “Dispute Resolved in Favor of Debtor.”

Collection activities will be halted.

**Agency Agrees (Partial).** Select this decision if the agency determines, based on an independent review, that the bill amount is incorrect and needs to be adjusted.

**FMS will:**

- confirm the decision and adjustment.
- modify the bill in FMMI and CRS/CSNG for the adjusted amount.
- enter corresponding action in the relocation system.
- record the decision in CRS/CSNG, and select, “Dispute Resolved in Favor of Debtor.”

Collection activities will be pursued for the balance based on the adjusted amount.

**Agency Disagrees.** Select this decision if the agency determines, based on an independent review, that the bill is valid.

**FMS will** record the decision in CRS/CSNG and select, “Dispute Resolved in Favor of Agency.”

Collection activities will continue.

**CRS will** issue the “Due Process Letter” if the bill is 30 days or more past due.

#### **Reason 2: Validity of Receivable (Bill) Amount – Partial/Full Payment Submitted.**

**Agency Agrees:** Select this decision if the agency determines, based on an independent review, that the bill amount paid satisfies the indebtedness.

**FMS will:**

- confirm the decision and adjustment.
- cancel the balance in FMMI and CRS/CSNG.
- enter corresponding action in the relocation system.
- record the decision in CRS/CSNG and select, “Dispute Resolved in Favor of Debtor.”

Collection activities will be halted.

**Agency Agrees (Partial):** Select this decision if the agency accepts partial payment and agrees that the bill should be adjusted to a lesser principal amount based on an independent review.

**FMS will:**

- confirm the decision and adjustment.
- adjust the bill in FMMI and CRS/CSNG.
- enter corresponding action in the relocation system.
- record the decision in CRS/CSNG and select, "Dispute Resolved in Favor of Debtor."

Collection activities will continue for remaining amount due.

**Agency Disagrees.** Select this decision if the agency determines that the bill amount is valid.

**FMS will:** record the decision in CRS/CSNG, and select, "Dispute Resolved in Favor of Agency."

Collection activities will continue.

**Reason 3: Reimbursement of Fees – Debt Paid in Full.**

**Agency Agrees.** Select this decision if the agency agrees that fees should be refunded. The fees will be refunded when the bill has been paid in full.

**FMS will:**

- use the relocation accounting to process the refund unless other funding is provided.
- record the decision in CRS and select, "Dispute Resolved in Favor of Debtor."

**Agency Disagrees.** Select this decision if the agency determines that the fees are valid and still owed by the debtor.

Collection activities will continue if the bill has not been paid.

### **Explanation of Waiver Decision**

Provide the basis of the waiver decision. The requestor will be given this information. Avoid terminology the debtor may not understand.

### **Agency Signature**

The agency's approving official must print their name and sign, using a wet or digital signature, to approve the waiver decision. If a wet signature is used, enter a date by using the dropdown calendar, then print the form.