

**(YOUR COMPANY INFORMATION)**

**(DATE)**

**(CUSTOMER COMPANY)  
(CUSTOMER CONTACT)  
(ADDRESS)  
(CITY, STATE) (ZIP CODE)**

**EMAIL:**

**FAX:**

*RE:* SETTLEMENT AGREEMENT  
Balance: \$(**FULL AMOUNT DUE**)

Dear **(CUSTOMER CONTACT)**:

Pursuant to our discussion of **(DATE NEGOTIATED)** we have agreed to accept \$(**AMOUNT OF SETTLEMENT**) as full and final settlement of all claims due provided the following terms are met:

**TERMS: (DEFINE THE AGREED TERMS, i.e.)**

12 payments of \$(**PAYMENT AMOUNT**) per month beginning **(DUE DATE OF 1<sup>ST</sup> PAYMENT <MONTH> <DATE> <YEAR>)** and ending **(DUE DATE OF THE FINAL PAYMENT <MONTH> <DATE> <YEAR>)**.

**REMITTANCE ADDRESS: (ADDRESS WHERE PAYMENTS ARE TO BE MADE)**

**DEFAULTS:** Payments not received when due and exceed a **(NUMBER OF DAYS)** grace period, or any check that fails to clear your bank for any reason, will default this agreement in its' entirety.

In the event of default **(CUSTOMER COMPANY NAME)** agrees to pay the full amount originally claimed due, less any partial payments made up to & including the date of default.

**{OPTIONAL, BUT RECOMMENDED}**

**(CUSTOMER COMPANY NAME)** further agrees that should a default occur they will compensate **(YOUR COMPANY NAME)** with interest of **(APR)** per annum, **(MONTHLY PERCENTAGE)** from the date of default.

It is further agreed, should **(YOUR COMPANY NAME)** deem it necessary to retain an outside collection agency and/or an attorney to protect our right of payment **(CUSTOMER COMPANY NAME)** will pay all actual collection fees, attorney fees, and all court costs associated with **ANY** litigation that arises due to non-payment of this agreement.

**Please sign below as an acknowledgment of the agreed terms.**

Very truly yours,  
**(YOUR SIGNATURE),(TITLE)  
(YOUR COMPANY NAME)**

\_\_\_\_\_  
**AUTHORIZED SIGNATURE  
(CUSTOMER COMPANY)**

\_\_\_\_\_  
**TITLE**

\_\_\_\_\_  
**PRINT NAME**