

## Tax office Declaration of Representation & Authorization

TAX YEAR	

## Instructions:

- Taxpayer/Party must sign and date this form in Part I and provide proper picture identification for the file.
- Representative must sign and date this form in Part II and provide proper picture identification for the file.
- This Declaration and Authorization expires nine (9) months after the Taxpayer/Party signature date below.
- IF FORM IS NOT COMPLETED, SIGNED AND DATED, THE REPRESENTION AND AUTHORIZATION WILL BE VOID.

Part I TAXPAYER DECLARATION AND SIGNATURE			
Due to varied circumstances I,		, (Party) hereby authorize	
	(Representative	e) to act as my representative in my stead.	
Representation is granted for the following 'in tax office' acts and purposes:			
DROP OFF Personal tax related data (including but not limited to completed tax questionnaires, income forms, deduction forms, backup receipts, etc.) and Identification verification (Driver's License, Social Security Cards, Passport ID, birth certificate, etc.)	PICK UP/RECEIVE Personal tax related data (including but not limited to tax return documents and any associated backup (e.g. Client Files)	RECEIVE EMAIL/TEXT MESSAGES relating to the client's documentation in effort to expedite completing, filing and confirmation of return transmission, rejection, completion, etc.	
AUTHORIZED?  ☐ Yes ☐ No	AUTHORIZED?  ☐ Yes ☐ No	AUTHORIZED?  □ Yes □ No	
I authorize my representative to receive, inspect and/or return my confidential tax information and to perform acts I can perform with respect to tax matters noted above. For example, my representative shall have the authority to acknowledge any in-tax office only agreements, consents, or similar. I acknowledge that THIS AUTHORIZATION DOES NOT INCLUDE SIGNING A TAX RETURN OR ELECTRONIC FILING FORMS ON BEHALF OF ANOTHER PARTY. Only a taxpayer can certify his/her tax return or release such an authorization via a Power of Attorney with the taxing authority.  Date:  [Taxpayer]			
Part II REPRESENTATION AND ACKNOWLEDGEMENT			
I, the assigned Representative, by signing below, hereby certify that I am willing to accept the responsibility authorized and will abide by such designations. I will act truthfully and expeditiously in exercising the rights vested in me.			
► Signature:(REPRESENTATIVE)	Date: _		
Part III TAX OFFICE ACCEPTANCE/NOTES			
File:			