# Form PAR 101 Virginia Power of Attorney and Declaration of Representative

Virginia Tax P. O. Box 1115 Richmond, VA 23218-1115 Individual fax: (804) 254-6113 Business fax: (804) 254-6111

This is a legal document.

If this Form PAR 101, Power of Attorney and Declaration of Representative is not signed and dated, lacks complete information, or is illegible, it will be denied.

Asterisks denote required fields. Read the instructions carefully before completing this form.

1. Taxpayer Information										
Taxpayer Name (I	ndividual, Business, or	Fiduciary)*	SSN, ITIN, or FEIN*							
Spouse Name (Fo	or joint representation or	nly. See instruction	Spouse SSN or ITIN							
Address*			Daytime Telephone Number ( )							
Address				Alternative Telephone Number ( )						
City*		State*	ZIP Code*	Email Address						
2. Maintain o	r Revoke Prior Aut	thorization								
Maintain authorization for the agent listed below. This form automatically revokes all earlier powers of attorney on file with Virginia Tax for the same tax matters covered by this form.										
(Specify ag	cify agent name, address, ZIP Code, and date granted. Attach copy of the power of attorney form.)									
of attorney	<b>Revoke prior authorization(s).</b> To revoke a prior power of attorney without naming another representative, send a copy of the power of attorney form to Virginia Tax at the address above and write "REVOKE" across the top. If you do not have a copy of the power of attorney form, provide the agent's name, address, ZIP Code, and date granted:									
3. Tax Matters – Taxable years or periods may not extend more than 3 years into the future. You must designate at least one tax type and taxable year period.*										
Annual Income	Taxes Only - Indivi	dual, Corporat	te, Pass-throug	h Entity, Fiduciary	y, or Estate Tax Type					
Tax Type Taxable Years Do Not Enter "All Years" – Must be Specific										
Business, Excise, Commodity, and Other Taxes										
Tax Type	15-Character Virgini	ia Tax Account	Do	Do Not Enter "All Periods" – Must be Specific						
	Numbe REQUIRED: See I			ning Period M/YYYY)	Ending Period (MM/YYYY)					

		entative Information. A ceive copies of corresp		resentatives should	be listed on an			
Primary Represe		Automatic Correspondence						
First Name*		Last Name*		An Authorized Agent will automatically be mailed copies of correspondence regarding the tax matters.				
Address		Authorized Agent Number						
Address			s of any correspondence					
City		State	ZIP Code	Mail copies of email communications to agent.				
Daytime Telephone	Number	Fax Number		Email Address				
Additional Repre	sentative – Mu	st be a person; cannot b	e a husiness	Automatic Co	rrespondence			
First Name		An Authorized Agent will automatically be mailed copies of correspondence regarding the tax matters.						
Address		Authorized A	gent Number					
Address		Do <b>NOT</b> mail copies of any correspondence to agent.						
City		State	ZIP Code	Mail copies of emai agent.	I communications to			
Daytime Telephone	Number	Fax Number ( )		Email Address				
5. Signature of Taxpayer(s) and Acknowledgment of Authorized Acts								
By signing this form	n, I am granting	the representative(s) listed in	n Section 4 the a	authority to:				
<ul><li>Perform all act</li><li>Represent me agree to a tax</li></ul>	s that I can performed before Virginia Tadjustment.	ential tax information for the orm with respect to the spectax, including consenting to be acts of my Authorized Age	ified tax matters, extend the time	, and to assess tax and execut				
The authority does copy of a tax return	not, however, in n, sign certain ref	clude the power to receive r turns, or consent to a disclos	efund checks, so sure of tax inforn	ubstitute another represenation.	entative, request a			
signed by a corpor the taxpayer, they	ate officer, partne certify that they h	xpayer and the spouse listeer, guardian, tax matters par nave the authority to execute y either the taxpayer or the a	tner, executor, re this form on be	eceiver, administrator, or	trustee on behalf of			
Print Name*		Signature*	Signature*		Date*			
Print Name		Signature		Title	Date			
listed in Section 1.		: Under penalties of perjury		·	, , ,			
Representative	Designation Letter from Above List	Print Name *	Represe	entative Signature*	Date*			
Primary								
Additional								

# INSTRUCTIONS FOR VIRGINIA FORM PAR 101 POWER OF ATTORNEY AND DECLARATION OF REPRESENTATIVE

### **Form Purpose**

#### Use Form PAR 101 to:

- Authorize a person to represent you before Virginia Tax with respect to the tax matters you specify, or
- Revoke a prior power of attorney authorization.

THIS IS A LEGAL DOCUMENT: When you submit Form PAR 101, you are authorizing the person you name in Section 4 to be your representative. For the tax matters you specify in Section 3, your representative will be able to receive and inspect your confidential tax information and perform any and all acts you can perform, including consenting to extend the time to assess tax or executing consents that agree to a tax adjustment. The acts of your representative may increase or decrease your tax liabilities and legal rights. Certain exceptions apply. See below.

#### When to submit Form PAR 101:

The following are examples of when you need to complete and submit Form PAR 101:

- 1. You are disputing an assessment of tax and a third party is representing you before Virginia Tax,
- You have been notified that we will be conducting an audit of your account and you have engaged the services of a third party to assist with the audit, or
- You are the administrator of a deceased individual's estate and you need to grant access to the decedent's confidential tax information to a third party in order to perform your duties.

The above list is not all-inclusive. There are other similar situations that may require you to grant a person the authority to act on your behalf, including the authority to obligate and bind you to agreements and to receive and inspect your confidential tax information.

#### When a Form PAR 101 is NOT required:

Form PAR 101 is not required when a person merely furnishes information or prepares a report or return for you or your business. For example, you do not need to submit Form PAR 101 to:

- Authorize a tax professional (CPA, Enrolled Agent, tax preparer, or payroll service provider) to discuss routine issues regarding return filings and payments the tax professional submitted on your behalf,
- Authorize an employee or officer of your business to discuss routine issues regarding return filings and payments submitted by your business, or
- 3. Authorize a fiduciary (trustee, receiver, or guardian) to act as Authorized Agent, because a fiduciary already stands in the position of the taxpayer.

Virginia Tax will discuss routine issues regarding return filings and payments and related assessments and adjustments with your designated tax professionals and the

employees and officers of a business, provided we are able to verify the person and the person's relationship to you or your business.

**Exceptions** - The power of attorney you grant to your representative using Form PAR 101 does not include the power to receive refund checks, the power to substitute another representative, the authority to execute a request for a tax return, the power to sign certain returns for you, or the power to consent to a disclosure of tax information.

### **Section 1 - Taxpayer Information**

**Individual** - If the tax matter involves a joint return and you and your spouse are designating the same representative, provide your spouse's name and social security number.

**Sole Proprietor** - For business tax matters, enter your name and the federal employer identification number for your business.

Corporations, Partnerships, or Associations - Enter the legal name of the organization and the organization's federal employer identification number. If the tax matter involves a consolidated or a combined tax return filed for a corporation, do not attach a list of subsidiaries or affiliated corporations to this form. Only the parent corporation's information is required in Section 1. A subsidiary or affiliate must file its own PAR 101 for returns that it files separately.

**Fiduciary/Trust** - Enter the name and federal employer identification number of the trust, and the telephone number and email address of the trustee. The trustee must sign the form.

**Estate or Inheritance Tax** - Applicable only for decedents whose date of death was prior to July 1, 2007. Enter the name and the social security number of the deceased taxpayer and provide the address, telephone number, and email address of the decedent's personal representative. The taxpayer's personal representative must sign and date the form.

# Section 2 - Revoking or Maintaining Prior Authorization

Check the box that applies. If you are naming a representative, any prior power of attorney on file with Virginia Tax for the same tax matters covered by the Form PAR 101 you are submitting will be automatically revoked unless you attach a copy of any power of attorney you want to remain in effect.

Either the taxpayer or their representative may revoke the power of attorney. This must be done in writing by submitting a copy of Form PAR 101 with "REVOKE" written on the top of the form or by sending a written request. If you wish to revoke the power of attorney for only one spouse on a joint power of attorney, this should be done by a submitting a letter to indicate which spouse is no longer represented.

### **Section 3 - Tax Matters**

Be specific. You should only grant a person your power of attorney for taxable periods for which you have a tax matter.

You may specify taxable periods no more than 3 years into the future. Future periods are determined starting after Dec. 31 of the year in which we receive Form PAR 101. You may list the current taxable year or period and any taxable years or periods that have already ended as of the date you sign Form PAR 101.

Annual Income Taxes - If the tax matter involves individual, corporate, pass-through entity, or fiduciary income tax, enter the name of the tax under "Tax Type." Also use this section for composite/unified filing tax matters. If the tax matter involves estate tax or inheritance tax for a taxpayer whose date of death was prior to July 1, 2007, enter the date of death of the taxpayer in the taxable year field.

Business, Excise, Commodity, and Other Taxes - You must enter the tax type and the beginning and ending periods covered by this form. For each tax type, you must also provide your assigned 15-character Virginia Tax Account Number. If you have multiple locations, be sure to list the account number for each location. If you do not enter your account number(s), the form will be returned.

**Exceptions** - For the following tax types, leave the Virginia Tax Account Number field blank: Apple Excise Tax, Bank Franchise Tax, and Rolling Stock Tax on Railroads and Freight Car Companies.

# Section 4 - Authorized Agent/Representative Information

You must provide complete information for each representative listed on the form. You cannot name a business as your representative. Your representative must be a person. In addition, each representative must sign and date the form. The signature must be an actual signature and cannot be an electronic signature or rubber stamp.

Virginia Tax will automatically mail copies of all outgoing correspondence sent to you regarding the tax matters listed in Section 3 to your Authorized Agent provided that:

- Your Authorized Agent is registered with Virginia Tax, and
- You provide the Authorized Agent's number, a unique 9-character identification number assigned by us that begins with "A."

Virginia Tax will not automatically mail correspondence to your Authorized Agent in the following situations:

- You do not provide your Authorized Agent's number, or
- You check the box indicating that you do not want correspondence automatically mailed to your Authorized Agent.

We will automatically mail copies of secure email to your Authorized Agent if you have opted to have copies of email communications sent to your agent. Taxpayers may use secure email to discuss specific questions related to their account. The authorized representative(s) will receive copies of this secure email communication through the U.S mail. To use secure email on Virginia Tax's website at **www.tax.virginia.gov**, log in to iFile (business or individual) or iReg, select Secure Message to send and receive secure email.

To register as an Authorized Agent, your representative must submit Virginia Form R-7. If Form R-7 is submitted with Form PAR 101, enter "Applied For" in the Registered Authorized Agent Number field. Form R-7 is available at www.tax.virginia.gov.

## Sections 5 and 6 - Signature of Taxpayer(s), Acknowledgment of Authorized Acts, and Representative Signature

**Individuals** - You must sign and date the form. If the tax matter involves a joint return and you and your spouse are designating the same Authorized Agent(s), your spouse must also sign and date the form.

**Corporations or Associations** - An officer having authority to bind the taxpayer must sign and date the form.

**Partnerships** - All partners should sign unless only one partner is authorized to act in the name of the partnership. A partner is authorized to act in the name of the partnership if, under state law, the partner has authority to bind the partnership. A copy of such authorization should be attached. For dissolved partnerships, see 26 CFR 601.503(c)(6).

**All others** - If the taxpayer is a dissolved corporation, decedent, insolvent, or a person for whom or by whom a fiduciary (a trustee, guarantor, receiver, executor, or administrator) has been appointed, see 26 CFR 601.503(d).

The representative(s) must sign and date the form.

**Note** - Generally, the taxpayer signs first, granting the authority and then the Authorized Agent signs, accepting the authority granted. The date for both the taxpayer and the representative must be within 45 days for domestic authorizations and within 60 days for authorization from taxpayers residing abroad. If the taxpayer signs last, then there is no timeframe requirement.

All signatures on the form must be actual and cannot be electronic or rubber stamps.

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Mail or fax the completed form and enclosures to:

Virginia Tax P.O. Box 1115 Richmond, Virginia 23218-1115

Business fax: (804) 254-6111 Individual fax: (804) 254-6113

For individual assistance call: (804) 367-8031 For business assistance call: (804) 367-8037