

REV 27 0060 (3/27/18)

# Confidential Tax Information Authorization

# I authorize the Department of Revenue to share my confidential tax information as indicated.

Use this form to authorize the Department of Revenue to share your confidential tax information with a third party. You can also use this form to authorize the Department to send confidential tax information using regular (unsecure) fax or email.

1. My informatio	n (This information w	ill not be used to upd	ate your b	usiness recor	d.*)
Taxpayer or business	s name				
Mailing address	ber		City	ST	Zip
Email		Fax			<u> </u>
	ss record, go to http://dor.v				
2. Share my cor	nfidential tax inform	ation with the indi	vidual(s)	company li	sted below.
	ing a third party, go to step If authorizing specific peop				
Individual or compa	ny name				
Mailing address			City	ST	Zip
Phone	Fax	Email			
Place an X in the appropriate box below:				Authorized	names/email section
Any information	for any reporting period.				
Any information	for this reporting period	month/quarter and year to	month/quarter and yea	ar	
Only listed infor	mation for this reporting p	eriod month/quarter and year to	month/quarter and yea	ar	
				_	
Information to be shared	fidential tax informa	ation by regular er	nail or fa	<b>V</b>	
_		• •			
secure, and confident	partment's secure messag ial information may be inte by Clause resulting from u	ercepted by unauthorized	l persons. I a	accept these cor	
By checking tusing regular	this box, I authorize the email or fax.	Department to send r	ny confider	ntial tax inform	ation
4. My signature					
business owner, partn	ty of perjury, that I am autl er, corporate officer, or LL on (e.g., power of attorney	C member or manager in	n official reco	ords held by Was	shington State, or I hav
Taxpayer signature		Title		Da	ate
Print name		City and state v	vhere signed	d	
This authorization ren	nains in effect until revo	ked in writing by eithe	r party. Kee	ep a copy for yo	ur files. To revoke this
5. Fax to (360) 7	05-6175, email to <i>D</i>	ORTAAFaxIn@dor	wa.gov o	r mail <u>to add</u>	ress on back.
For tax assistance or to re	equest this document in an a	Iternate format,			
	all 1-800-647-7706. Teletype Relay Service by calling 711				

See instructions on page 2.

# **Authorization for Confidential Tax Information**

Page 2

#### **Confidential tax information**

Tax information is confidential and cannot be shared with anyone without express permission. By completing this form, you are authorizing the Department to share your confidential tax information with the person(s) you name. This request may cover all confidential tax information or it may be limited to certain information and/or reporting periods. In section 2, please describe the specific information you want the Department to share and the periods covered by this authorization.

### Secure messaging

Secure messaging is offered through the Department's online *My DOR* section. Taxpayers that have an online account can access secure messaging when logged in. In the "I Want To" menu click "Send a Message" and follow the instructions.

Taxpayers that don't have an online account can register at dor.wa.gov. To create an account, provide your name, email, and phone number; create a logon ID and password; then choose a security question.

If you want to add your business to your online account, enter your UBI/Account ID number and your letter ID. Your letter ID can be found on the upper right corner of the letter you received from the Department when you first opened your business. It is also on mailed tax returns and at the bottom of balance due notices.

Only people authorized to access your online account can see secure messages.

## ATTN: (If you are working with a Revenue employee)

If you are working with a Revenue employee, write the employee's name on the ATTN: line on the bottom of page 1 of this form and *return the form as instructed.* 

#### Otherwise, send this form to:

**Fax** (360) 705-6175

Email DORTAAFaxIn@dor.wa.gov

Mail Dept. of Revenue

Taxpayer Account Administration - ICAP

PO Box 47476

Olympia, WA 98504-7476

**Questions?** Call the Department at 800-647-7706.



Phone: 800-647-7706 Fax: (360) 705-6175

http://dor.wa.gov