



## Power of Attorney & Declaration of Representative Form

### PART 1: POWER OF ATTORNEY

#### Section 1: Taxpayer Information *(Please type or print)*

Taxpayer Name(s): \_\_\_\_\_

Taxpayer Address: \_\_\_\_\_

Social Security Number(s) or Federal Identification Number: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Alternative Phone: \_\_\_\_\_

Hereby appoint(s) the following representative(s) as attorney(s)-in-fact:

#### Section 2: Representative(s) *(Please type or print)*

Name and Address	Phone	Fax

#### Section 3: Acts Authorized

The representative(s) are authorized to receive and inspect confidential tax information and to perform any and all acts that I (we) can perform with respect to the tax matters described in Section 3, (for example, the authority to sign any agreements, consents, or other documents, and/or discuss tax/licensing matters). The authority does not include the power to receive disbursement of a refund of tax licensing payments. If the representative(s) are authorized to set up an online user account, the representative will be allowed to access, enter, and alter information contained within the account.

#### Section 4: Receipt of Refund Checks

If you want to authorize a representative name in Section 2 to receive, BUT NOT TO ENDORSE OR CASH, refund checks initial here \_\_\_\_\_ and list the name of the representative below.

Name of representative authorized to receive check(s):

\_\_\_\_\_

**Finance  
Department**  
Revenue Office  
144 Tichenor Ave.  
Auburn, AL • 36830  
334.501.7239  
Fax: 334.501.7297

**Section 6: Notices and Communications**

Notices and other written communications will be sent to the first representative listed in Part 1, Section 2.

- If you want the second representative listed to receive such notices and communications, check this box ☐
- If you do not want any notices or communications sent to your representative, check this box ☐
- If you want any notices and communications sent to both you and the representative, check this box ☐

Any notices or communication resulting from transactions done in the Citizen Self Service online account will be sent to the email address of the user who finalizes the transaction.

**Section 7: Retention/Revocation of Prior Power(s) of Attorney**

The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the City of Auburn-Finance Department-Revenue Office for the same tax/licensing matters and years or periods covered by this document.

**If you do not want to revoke a prior power of attorney, check this box** ☐

**Section 8: Signatures of Taxpayer(s)**

If a tax/licensing matter concerns any business type other than a sole proprietorship (i.e. partnership, corporation, LLC, etc.), form must be signed by the president, vice-president, chief executive officer or chief financial officer. The person(s) signing this form certifies that he/she has the authority to execute this form on behalf of the taxpayer/business.

**Note: If this power of attorney is not signed, it will be returned.**

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 Signature/Title and Date

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 Print Name/Title

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 Signature/Title and Date

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 Print Name/Title
**PART 2: DECLARATION OF REPRESENTATIVE**

Under penalties and perjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Treasury Department Circular No. 230 (31 CFR, Part 10), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuaries, and others;
- I am authorized to represent the taxpayer(s) identified in Part I, Section 1 for the tax/licensing matter(s) specified and
- I am one of the following:
  - a. Attorney—a member in good standing of the bar of the highest court of the jurisdiction shown below.
  - b. Certified Public Accountant—duly qualified to practice as a certified public accountant in the jurisdiction shown below.
  - c. Enrolled Agent—enrolled as an agent under the requirements of the Treasury Department circular No. 230.
  - d. Officer—a bona fide officer of the taxpayer's organization.
  - e. Full-time Employee—a full-time employee of the taxpayer.
  - f. Family Member—a member of the taxpayer's immediate family (i.e. spouse, parent, child, brother, or sister).
  - g. Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Service is limited by section 10.3(d)(1) of Treasury Circular No. 230).
  - h. Unenrolled Return Preparer—an unenrolled return preparer under section 10.7(c) (1) (viii) of Treasury Circular No. 230.

**Note: If this declaration of representative is not signed and dated, the power of attorney will be returned.**

Designation – Insert or above letter (a-h)	Jurisdiction (State) Enrollment Card No.	Signature	Date