

Form 42 2446

**Confidential Tax Information Authorization** 

Use this form to authorize the Department of Revenue to:

- Send confidential tax information through unsecure email or fax (to you or an authorized third party) and/or
- Share your confidential tax information with a third party.

My information (This information will not be used to update your business record.\*)

Taxpayer or business name:		Account ID/UBI number:		
Mailing address:		City:	State: Z	Zip:
Phone:	Email:		Fax:	

\*To update your business record, go to dor.wa.gov and log in to your My DOR account.

# Which authorization are you providing? (For third party authorizations, complete A and B.)

A. Send my confidential tax information by email or fax. By checking this box, I authorize the department to send my confidential tax information using regular email or fax to all email addresses or fax numbers listed on this form.

I am aware of the department's secure message system described on page 3. I know regular email and fax are not as secure, and confidential information may be intercepted by unauthorized persons. I accept these conditions and waive any violation of confidentiality resulting from use of unsecured email or fax. (RCW 82.32.330)

**B.** Share my confidential tax information with the individuals/company listed below. If you are not authorizing a third party, skip this section and go to the signature page. If you are authorizing an entire company or a Legislator's office, add the words "and staff." If authorizing specific people, add additional name(s) in the Authorized names/email section.

	1 /						
Mailing a	address:	City:	State:	Zip:			
Phone:	ne: Email:		Fax:				
Check the appropriate box below:							
Any information for <b>any</b> reporting period.							
Any information for <b>this</b> reporting period:							
	Month/quarter/year:	to Month/quarte	r/year:				
Only listed information for this reporting period.							
	Month/quarter/year:	to Month/quarte	r/year:				
Information to be shared: List authorized names. Include email addresses only if you've checked the box in section A.							

To request this document in an alternate format, please complete the form <u>dor.wa.gov/AccessibilityRequest</u> or call 360-705-6705. Teletype (TTY) users please dial 711.

Individual or company name:



### Signature

I authorize the Department of Revenue to share my confidential tax information as indicated on page 1 of this form. I declare, under penalty of perjury, that I am authorized to sign this form. I am listed as the real property owner or as the business owner, partner, corporate officer, or LLC member or manager in official records held by Washington State, or I have attached documentation (for example: power of attorney, annual report, executor) that grants me the authority to sign.

Taxpayer signature:

Title:

Date:

Print name:

City and state where signed:

**This authorization remains in effect until revoked in writing by either party.** Keep a copy for your files. To revoke this authorization, write "Revoke" across the front of this form and return it to the department as indicated in the next section

### What to do next

**ATTN** (if you are working with a Revenue employee, write their name here):

Submit this form by fax, email, or mail:

Fax: 360-705-6175
Email: DORTAAFaxIn@dor.wa.gov
Mail: Dept. of Revenue Taxpayer Account Administration - ICAP PO Box 47476 Olympia, WA 98504-7476



# Instructions

#### Confidential tax information by email, fax, or to a third party

Tax information is confidential and cannot be shared with anyone without express permission.

By completing this form, you are authorizing the department to:

- Send confidential tax information through unsecure email or fax, to you or an authorized third party. (Section A);
- Share your confidential tax information with the third party(ies) provided. (Section B).

This request may cover all confidential tax information or it may be limited to certain information and/or reporting periods. In section B, please describe the specific information you want the department to share and the periods covered by this authorization.

#### Secure messaging through My DOR

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. On the "More Options" tab, select "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 2 of this form and submit the form using one of the ways below.

Submit this form by fax, email, or mail:

Fax:360-705-6175Email:DORTAAFaxIn@dor.wa.govMail:Dept. of RevenueTaxpayer Account Administration - ICAPPO Box 47476Olympia, WA 98504-7476

#### **Questions?**

Call the department at 360-705-6705.