

Attention: _____ Fax: _____

Secure Messaging

The Department of Revenue offers secure messaging, a safe environment where businesses and consumers can communicate with the Department and be confident their confidential information is secure. Secure messaging is the only method of electronic mail a Department employee can use to communicate electronically with you and your business unless you authorize use of email or fax. To register for secure messaging, go to the *My account* section on our website at dor.wa.gov and select *Register now*.

Email and Fax Authorizations

If you prefer that the Department use regular email or fax rather than secure messaging, complete the appropriate information below.

I authorize the Department to communicate via email and/or fax with the following business owners/employees:

<i>Name/Title</i>	<i>Email Address</i>	<i>Fax Number</i>

I authorize the Department to communicate via email and/or fax to the following 3rd party representatives:*

<i>Name/Title</i>	<i>Email Address</i>	<i>Fax Number</i>

**For all 3rd party representatives, a Confidential Tax Information Authorization form is also required.*

I acknowledge that email and fax communications are not secure, and that confidential information sent via email or fax may be intercepted and used by unauthorized persons. I accept these conditions and waive any violation of the Secrecy Clause (RCW 82.32.330) that might arise from an unauthorized interception and/or use of email or fax. I am listed in official records held by Washington Secretary of State or Department of Licensing as the owner, partner, corporate officer, or member of the LLC.

Business Name

_____-_____-_____
Tax registration/reporting number (TRN)

Signature of Owner or Authorized Officer


Date

Printed Name/Title

Phone #

Form must be completed by business owner or authorized officer (not by 3rd party representative). This authorization remains effective until revoked in writing by either party. To revoke, write "cancel previous authorizations" in the name/title box. Complete your business information, sign, and return form.

Keep a copy of this completed form for your files. If you were asked to send this document to a specific DOR employee, enter the person's name on the Attention line at the top along with his or her fax number. Otherwise, send this form to:



Washington State
Department of Revenue
Taxpayer Services
PO Box 47478
Olympia, WA 98504-7478
FAX: (360) 705-6696