(Rev. October 2012)

Department of the Treasury Internal Revenue Service

Tax Information Authorization

▶ Information about Form 8821 and its instructions is at www.irs.gov/form8821.

▶Do not sign this form unless all applicable lines have been completed. ▶ To request a copy or transcript of your tax return, use Form 4506, 4506-T, or 4506T-EZ.

Received b	y:
Name	
Telephone	
Function	····
Date	

Taxpayer information. Taxpayer must sign and date this form of Taxpayer name and address (type or print)			on line 7. Taxpayer identification number(s)			
			Daytime telephone number	Plan number (if applicable)		
2 Appointee. If you wish to name m	ore than one appointee, attacl	h a list to	this form			
Name and address		CAF No.				
		PIIN				
		Telephone No.				
		Fax No		elephone No. Fax No.		
3 Tax matters. The appointee is au line. Do not use Form 8821 to req				7		
(a) Type of Tax (Income, Employment, Payroll, Excise, Estate, Gift, Civil Penalty, etc.) (see instructions)	(b) Tax Form Number (1040, 941, 720, etc.)		(c) Year(s) or Period(s) the instructions for line 3)	(d) Specific Tax Matters (see instr.)		
4 Specific use not recorded on Centralized Authorization File (CAF). If the tax information authorization is for a specific use not recorded on CAF, check this box. See the instructions. If you check this box, skip lines 5 and 6						
6 Retention/revocation of tax information authorizations. This tax information authorization automatically revokes all prior authorizations for the same tax matters you listed on line 3 above unless you checked the box on line 4. If you do not want to revoke a prior tax information authorization, you must attach a copy of any authorizations you want to remain in effect and check this box						
7 Signature of taxpayer. If signed by a corporate officer, partner, guardian, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute this form with respect to the tax matters and tax periods shown on line 3 above.						
► IF NOT SIGNED AND DATED, THIS TAX INFORMATION AUTHORIZATION WILL BE RETURNED.						
▶ DO NOT SIGN THIS FORM IF IT IS BLANK OR INCOMPLETE.						
Signature				Date		
Print Name				Title (if applicable)		
PIN nun	nber for electronic signature					