

**TAXPAYER/FEEPAAYER AUTHORIZATION FOR
TAX PREPARER TO PERFORM ELECTRONIC SERVICES**

ACCOUNT INFORMATION

CALIFORNIA DEPARTMENT OF TAX AND FEE ADMINISTRATION ACCOUNT NUMBER	BUSINESS EMAIL ADDRESS
BUSINESS NAME	

I hereby authorize the tax preparer listed below to perform the following function(s) with the California Department of Tax and Fee Administration (CDTFA) on my behalf:

- File returns and/or prepayments
- Submit a payment
- Submit a request for a payment plan
- Account maintenance (update business email address and view history of online transactions)
- Submit a request for:
 - Relief from penalty, interest, or collection cost recovery fee
 - Extension of time to file a tax return
 - Declaration of timely mailing
 - Relief from penalty and interest due to disaster
- Automated license renewal:
 - Electronically renew a license and/or permit
 - Request additional decals

NAME OF TAXPAYER/FEEPAAYER <i>(please print)</i>	
SIGNATURE OF TAXPAYER/FEEPAAYER	DATE
TITLE <i>(please print)</i>	TELEPHONE NUMBER ()

TAX PREPARER INFORMATION

NAME OF TAX PREPARER <i>(please print)</i>	EMAIL ADDRESS
ADDRESS <i>(street, city, state, ZIP code)</i>	TELEPHONE NUMBER ()

A confirmation email will be sent to you and your tax preparer.

If you have any questions or need assistance with completing this form, call our Compliance Branch at 1-916-327-4208. Customer service representatives are available weekdays from 8:00 a.m. to 5:00 p.m. (Pacific time), except state holidays.

Return this form to:

California Department of Tax and Fee Administration
Compliance Branch - Registration and Licensing, MIC: 88
PO Box 942879
Sacramento, CA 94279-0088