

# Revocation of Tax Power of Attorney

Use this form to formally revoke a previously granted Tax Power of Attorney. Please fill out the details below, print the document, and send a copy to your tax authority and the revoked representative.

## 1. Taxpayer (Principal) Information

Taxpayer Full Name / Business Name:

Social Security Number (SSN) or Employer Identification Number (EIN):

Mailing Address:

Phone Number:

## 2. Representative Information (To Be Revoked)

Identify the individual(s) whose authorization is being revoked.

Representative Full Name:

Firm Name (if applicable):

Mailing Address:

## 3. Details of Revocation

Specify the original tax matters and periods that were covered under the Power of Attorney being revoked.

Type of Tax (e.g., Income, Employment, Sales):

Tax Form Number (e.g., 1040, 941, 1120):

Tax Years or Periods:

Date Original Power of Attorney Was Executed (if known):

## 4. Declaration and Revocation Statement

I hereby revoke the Tax Power of Attorney previously granted to the representative named above for the tax matters and periods specified. After the date of my signature below, the designated representative is no longer authorized to sign, represent, or receive confidential tax information on my behalf regarding these matters.

## 5. Signature of Taxpayer

Printed Name of Taxpayer:

Title (if signing for a business or entity):

Date of Revocation:

Physical Signature Line (Sign after printing):