

Tax Filing Authorization Letter

Date: [Insert Date]

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

[Tax Professional's Name]
[Tax Firm's Name]
[Firm's Address]
[City, State, Zip Code]

Dear [Tax Professional's Name],

I, [Your Name], the owner of [Your Business Name], authorize [Tax Professional's Name] to act on my behalf in matters concerning the preparation and filing of my business taxes for the tax year [Insert Tax Year]. This authorization includes the right to receive and inspect my tax information, as well as to represent me before the IRS and any state tax agency.

My business details are as follows:

- Business Name: [Your Business Name]
- Business Address: [Business Address]
- Tax Identification Number: [Your TIN]

This authorization is valid until revoked in writing. Please feel free to contact me directly at [Your Phone Number] or [Your Email Address] for any further information.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]
[Your Business Name]