# **Authorized Representative Declaration (Power of Attorney)**

**INSTRUCTIONS:** Use this form to authorize the Michigan Department of Treasury to communicate with a named individual or entity acting on your behalf. Also use this form to designate a representative to receive copies of correspondence regarding a particular tax dispute. All information designated as "required" must be supplied for this authorization to be effective.

PART 1: TAXPAYER OR DEBTOR INFO	ORMATION						
Taxpayer's Name and Address (Required)  If a business, include any DBA, trade or assumed name.	FEIN, M	FEIN, ME or TR Number (Required for business taxes)					
If filing joint return, include spouse's name.			ecurity Number (Required if Number listed)	Spouse's	Social Security I	Number	
Taxpayer's E-mail Address	Daytime	Telephone	Number (Required)	Fax Numb	er		
PART 2: REVOCATION OF AUTHORIT	Υ						
To revoke the authority of your current representat  I revoke all prior authorizations. I will repres	ent myself.		·				
I revoke prior authorizations in the matter/di  I revoke prior authorizations in the matter/di under Part 4 and/or 5.					e in Part 3 wh	o is authorized	
PART 3: REPRESENTATIVE APPOINT	MENT						
Your representative may be an entity or an individuindicated the authorization is effective as of the da							
Authorized Representative's Name and Address (Required)  Contact Name (Required if an entity is named)							
7		Telephone Number (Required)		Fax Number			
Authorization		ation Start [	Date (mm/dd/yyyy) Authorizati		tion Expiration Date (mm/dd/yyyy)		
	Authoriz	Authorized Representative's E-mail Address					
PART 4: TYPE OF AUTHORITY							
If you check a box, you authorize your representat	•	-					
1. Receive and inspect confidential informat notices involving a tax dispute, you mus     2. Make oral or written presentation of fact or	t complete Part 5.)	y). (To hav	ve your representative r	eceive co	pies of all fut	ure letters and	
	or argument.	Vou ma	ny roetrict authority in hove	ne 1 4 to 2	enocific matte	or (Not required)	
3. Sign returns.		You may restrict authority in boxes 1-4 to Tax Type, Debt or Fee			Year(s) or period(s)		
4. Enter into agreements.  5. All of the above.							
PART 5: REQUEST COPIES OF LETTERS AND NOTICES REGARDING A TAX DISPUTE							
By checking this box, you are directing Treasury to send a copy of all future notices and letters involving a particular tax dispute to your representative named in Part 3 under section 8 of the Revenue Act (MCL205.8). This dispute is for year(s) or period(s) and Tax (income tax, sales tax, use tax, etc.) (Tax and year(s) or period(s) are both required if this box is checked.)							
PART 6: TAXPAYER OR DEBTOR AUT	HORIZATION						
By signing this form, I authorize Treasury to comm	unicate with my repre	sentative o	consistent with the author	ity granted	1.		
Signature (Required)	Print Name (Required)		Title (Required if a business)		Date (Required)		
Spouse's Signature	Print Name		Title		Date (Required if spouse signs)		
TREASURY USE ONLY							
Accepted Rejected			Division Name			Reviewer Initials	

## **Purpose**

Use the Authorized Representative Declaration (Power of Attorney) (Form 151) to authorize the Michigan Department of Treasury (Treasury) to communicate with a named individual or entity acting on your behalf. This form may also be used to revoke your representative's authority or to designate a representative to receive letters and notices regarding a particular tax dispute.

**Required information.** If a box includes the word "Required," you must provide the information. If a box does not contain the required information, the form is invalid and you will be notified by letter.

Part 2: Revoking the authority of a representative. Complete Part 2 if you want to revoke your representative's authority in whole or in part or all prior authorizations. After you revoke your representative's authority, you may represent yourself, or you may appoint a new representative.

Part 3: Appointing an entity as your representative. If you appoint an entity as your representative, then any individual within that entity is authorized to act on your behalf. For example, if you appoint the XYZ Law Firm as your representative, any attorney or paralegal from that firm is authorized to act on your behalf. The "Contact Name" is only to ensure that information sent to the entity is directed to the individual overseeing your representation. The contact name is NOT your sole authorized representative. To appoint an entity, write in the Name and Address box (for example):

XYZ Law Firm 1234 Street City, State, ZIP Code

Appointing an individual as your representative. If you appoint a specific individual as your representative, then only that individual is authorized to act on your behalf. Treasury will only discuss with or disclose information to that individual. For example, if a specific attorney at the XYZ Law Firm is named as your representative, Treasury will not discuss with or disclose information to any other attorney or paralegal at the same firm. To appoint an individual, write in the Name and Address box (for example):

Lynn Lee XYZ Law Firm 1234 Street City, State, ZIP Code

Part 4: Type of authority: General or limited. You may grant your representative general or limited authority to act on your behalf. The actions that your representative may take will depend on the boxes that you check in Part 4. Confidential information (box 1) will only be provided upon request; Treasury will not automatically send confidential information to your representative. If you check box 5 in Part 4, you are granting your representative general authority to act on your behalf regarding any tax return and any debt. However, granting your representative general authority does not give the representative the right to receive future copies of letters and notices unless Part 5 is also completed.

Part 5: Requesting copies of letters and notices with respect to a tax dispute. If you complete Part 5, you must identify on the line in Part 5 a single tax matter that is in dispute. The dispute may cover more than one tax period or year. If you have more than one dispute with Treasury and want your representative to receive copies of future notices and letters with respect to those additional disputes, you must fill out a separate form for each dispute. Part 5 does not give a representative authority to act on your behalf. You must give your representative authority to act on your behalf by checking one or more boxes in Part 4 if you want your representative to do more than just receive future notices and letters. Only one representative can be authorized to receive future letters and notices regarding a specific tax dispute under Part 5. Treasury will only send future letters and notices to the person identified on the most recent form. If you appoint an entity as your representative, future letters and notices will be sent to the attention of the first "Contact Name."

**Deceased taxpayer.** Do not use this form for a deceased taxpayer. File a Claim for Refund Due a Deceased Taxpayer (MI-1310) with a death certificate and/or a letter of authority (issued by the probate court) for a personal representative.

# **MAILING OR FAXING INSTRUCTIONS**

## **Individual taxpayers:**

Michigan Department of Treasury Customer Contact Center Individual Correspondence Section P.O. Box 30058 Lansing, MI 48909 Fax: (517) 636-4488

If Treasury Office of Collections or Michigan Accounts Receivable Collection System (MARCS) has asked for this form and any attachments:

MARCS P.O. Box 30158 Lansing, MI 48909-7658 Fax: (517) 272-5562

If a Treasury field office representative has asked for this form, send it as directed by that office.

#### For all others:

Michigan Department of Treasury Customer Contact Center Registration Section P.O. Box 30778 Lansing, MI 48909-8278