



SMART BUSINESS SERVICES LIMITED

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AUTHORITY TO ACT AS TAX AGENT

AGENCY: SMART BUSINESS SERVICES LIMITED

IRD Number: 119-491-037

Your Full Name

Your IRD Number

I _____ give authority to **SMART BUSINESS SERVICES LIMITED**
(your full name)

to act on behalf of _____
(your full name)

for all tax types (except NCP or CPR) until further notice.

Authority is given to obtain information from Inland Revenue about all tax types (except NCP or CPR). This includes obtaining information through all Inland Revenue media and communication channels.

I also give my permission for you and your staff to discuss my tax affairs and provide and obtain information for all current and future revenues with Inland Revenue, bank or ACC or any other institution that may be necessary to get information to complete the required tax returns and/or annual returns.

Also, I understand information about my tax affairs may be obtained by telephone correspondence, internet on line services and any other appropriate means.

This authority also includes the signing of Tax Returns for Inland Revenue.

.....
(Signature)

.....
(Full Name)

.....
(Personal IRD number)

.....
(Date)

NB: Please complete the above form and attach copy of a valid photo ID.