VERMONT

AUTHORIZATION TO RELEASE TAX INFORMATION

FORM **8821-VT**

This form authorizes release of your tax information to an authorized recipient. This is NOT a Power of Attorney and does not authorize recipient to act on your behalf or make binding agreements for you.

Taxpayer's Name			Social Security Number	Federal ID Number
Taxpayor 5 Name			Coolar Coolarity (Variable)	Todorario Hambor
Spouse/Civil Union Partner Name			Social Security Number	
Address			Telephone Number	Fax Number
Address			reiephone Number	T dx Number
City, State, ZIP Code			E-mail Address	-
		1		
Authorized Recipient's Name			Telephone Number	
Address			Fax Number	
City, State, ZIP Code			E-mail Address	
		ion 2 is authorized to	inspect and/or receive t	ax return information related
to the tax matters listed he		(a)		(4)
(a) Type of Tax	(b) Tax Form	(c) Year(s) or Period(s)		(d) Specific Tax Issue
		_		
4 Signature of Taxpayer(s).				
If the tax return(s) in Section	ion 3 is a joint return, either spanner and			
If the tax return(s) in Section instructions. If you are a construction instruction in the section in the secti		ardian, executor, recei	ver, administrator, or to	rustee signing on behalf of the
If the tax return(s) in Sectionstructions. If you are a cataxpayer, your signature contacts	corporate officer, partner, gua onstitutes a certification that	ardian, executor, recei you have the authorit	ver, administrator, or to y to execute this form	rustee signing on behalf of the on behalf of the taxpayer.
If the tax return(s) in Sectionstructions. If you are a cataxpayer, your signature contacts	corporate officer, partner, gua	ardian, executor, recei you have the authorit	ver, administrator, or to y to execute this form	rustee signing on behalf of the on behalf of the taxpayer.
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If the tax return(s) in Sectionstructions. If you are a cataxpayer, your signature contacts	corporate officer, partner, gua onstitutes a certification that AND DATED, THIS AUTHOR	ardian, executor, recei you have the authorit	ver, administrator, or to y to execute this form	rustee signing on behalf of the on behalf of the taxpayer. N WILL BE RETURNED.
If the tax return(s) in Sectionstructions. If you are a contaxpayer, your signature of IF NOT SIGNED A	corporate officer, partner, gua onstitutes a certification that AND DATED, THIS AUTHOR	ardian, executor, recei you have the authorit	ver, administrator, or to y to execute this form of SE TAX INFORMATION	rustee signing on behalf of the on behalf of the taxpayer. N WILL BE RETURNED.
If the tax return(s) in Sectionstructions. If you are a contaxpayer, your signature of IF NOT SIGNED A	corporate officer, partner, gua onstitutes a certification that AND DATED, THIS AUTHOR	ardian, executor, recei you have the authorit	ver, administrator, or to y to execute this form of SE TAX INFORMATION	rustee signing on behalf of the on behalf of the taxpayer. N WILL BE RETURNED. Title (if applicable)

Form 8821-VT INSTRUCTIONS

This form allows the authorized recipient designated in Section 2 to receive, inspect or discuss with the Vermont Department of Taxes your confidential tax information for the tax type and tax periods listed in Section 3.

This form does not allow the authorized recipient to act on your behalf, to execute waivers, consents, or closing agreements, to bind you to a payment plan, or otherwise to represent you before the Vermont Department of Taxes.

Form 8821-VT signed by all parties must be received by the Vermont Department of Taxes within 60 days of the date the taxpayer signed the form.

Revocation of Authorization To revoke the authorization to disclose information to the recipient named in Section 2, simply provide a written statement to the Department indicating the tax type(s), tax matter(s) and tax period(s) for which you wish to revoke authorization. If you wish to revoke all authorization, indicate the name of the person who is no longer authorized and state "remove all taxes, years and periods."

Section 1 Taxpayer

Individuals – Enter your name, Social Security or Taxpayer Identification Number, the address where you live, and contact information in the space provided. If authorizing the release of confidential tax information for a jointly filed return, also enter your spouse/civil union partner information.

Corporations, Partnerships and other Business Entities – Enter the business name, Employer Identification Number, business address and contact information in the space provided.

Trusts – Enter the name, title, and address of the trustee; and the name of the trust and the trust's Federal Identification Number, and contact information in the space provided.

Estates – Enter the name, title and address of the decedent's executor/personal representative, the name and identification numbers of the estate, and contact information in the space provided. Estate identification numbers are the Federal Identification Number and the decedent's Social Security or Taxpayer Identification number.

Section 2 Authorized Recipient

Enter the name, address and contact information of your authorized recipient in the space provided. Please reference the authorized representative's name as entered here in any communication or submissions with the Vermont Department of Taxes.

Section 3 Scope of Authorization

Enter the tax type, tax form, and tax period you wish to disclose to your authorized recipient, and any specific tax issue you want the Vermont Department of Taxes to address beyond the tax return information. Examples of specific tax issues are tax lien, balance due on the return, tax liability, assessment of tax.

The tax periods must be identified. For example, to authorize disclosure of your 2008 Vermont personal income tax, enter Income as the tax type, IN-111 as the tax form, and 2008 as the tax year. For multiple years, indicate each tax year (2008, 2009, 2010) or 2008 - 2010 or 2008 through 2010. Taxpayers filing monthly or quarterly returns should enter the specific filing period or for the year. For example, enter Sales & Use as tax type, SU-451 as tax form, and either limited periods (1st quarter or August 2010) or the full year (2010 filings). If you are a fiscal year filer, use the ending year and month in the YYMMDD format for the tax period.

The authorization to disclose tax information cannot be honored if the tax type or tax periods are general designation such as "all years," "all periods," or "all taxes."

Section 4 Signatures

Individuals – Sign and date the authorization. If authorizing disclosure on a joint return, either spouse/civil union partner may sign the form.

Corporations – This form may be signed by an officer having legal authority to bind the corporation, a person designated by the board of directors or other governing body.

Partnerships – This form may be signed by partner who was a partner during any part of the tax period designated in Section 2.

Trusts and Estates – This form may be signed by the appointed guardian, executor, or administrator.