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STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE UPDATE NAME / ADDRESS / CONTACT INFORMATION FOR INDIVIDUAL

SC8822I (Rev. 7/27/22) 3314

dor.sc.gov

Save time and paper by completing this form on MyDORWAY, our free online tax portal! Go to **MyDORWAY.dor.sc.gov** and sign in to your existing account or create a new account to get started.

Complete this form to notify the SCDOR of a change of name, address, and/or contact information for an Individual Income Tax account.

The SCDOR will not accept this form unless you complete Section A and all other applicable sections, then sign in Section E.

Section A: Your identifying information - You must complete this section.				
Current name:		SSN/ITIN:		
•	e this section to update your le your legal name, you are REQUI	RED to include a copy of your SS		
Section C: Complete	e this section to update your m	ailing address.		
Prior mailing address	SS			
Street:				
County:	City:	State:	ZIP:	
Current mailing add	Iress			
Street:				
County:	City:	State:	ZIP:	
Section D: Complet	e this section to update your c	ontact information.		
Current phone number	er (include area code):			
Current email:				
Section E: Your sig	nature - You are REQUIRED to	sign this form to initiate your r	equest.	
Signature:			Date:	

Email this form, with any required documents, to: TaxSupport@dor.sc.gov

Instructions

Use this form to request an update of your name, address, and contact information for your Individual Income Tax account.

For faster results, complete this form on MyDORWAY, our free online tax portal, at **MyDORWAY.dor.sc.gov**. Sign in to your existing account or create a new account to get started.

You must complete Section A and all other applicable sections, then sign in Section E to initiate your request.

Section A: Your identifying information - You must complete this section.

Enter your current name and SSN or ITIN.

Section B: Complete this section to update your legal name.

- Enter your prior name.
- If you're updating your legal name, you must include a copy of your SSN card or ITIN documentation.

Section C: Complete this section to update your mailing address.

- Enter your prior mailing address and your current mailing address.
- Be sure all information is complete and accurate.

Section D: Complete this section to update your contact information.

- Enter your current phone number and email address.
- Be sure to include the area code with your phone number.

Section E: Your signature - You are REQUIRED to sign this form to initiate your request.

• The SCDOR will not accept this form if it is not signed.

If you're not making your request through MyDORWAY, email this form with any required documents to **TaxSupport@dor.sc.gov**.

The Family Privacy Protection Act

Under the Family Privacy Protection Act, the collection of personal information from citizens by the SCDOR is limited to the information necessary for the SCDOR to fulfill its statutory duties. In most instances, once this information is collected by the SCDOR, it is protected by law from public disclosure. In those situations where public disclosure is not prohibited, the Family Privacy Protection Act prevents such information from being used by third parties for commercial solicitation purposes.

Social Security Privacy Act Disclosure

It is mandatory that you provide your Social Security Number on this tax form if you are an individual taxpayer. 42 U.S.C. 405(c)(2)(C)(i) permits a state to use an individual's Social Security Number as means of identification in administration of any tax. SC Regulation 117-201 mandates that any person required to make a return to the SCDOR must provide identifying numbers, as prescribed, for securing proper identification. Your Social Security Number is used for identification purposes.