



Authorization Statement for Digital Government Services

Authorization

Personal information

Company Name

First Name

Surname

Address

Telephone Number

Crib Number

Information Proxy

Company Name

First Name

Surname

Address

Telephone Number

Crib Number

The undersigned authorizes the proxy to perform Digital Government Services on his/her behalf.

Date

Signature

Signature

This form must be printed and signed by both parties. The signed form can be uploaded or delivered by one or both parties to the Public Service Center Simpson Bay (After April 15, 2013) or at the Tax Department - Vineyard Building. The ID of the authorization provider is required.

NOTE: Only parties with a verified e-login can act as Proxy.

Select Government Services

The authorization is applicable for the following Government Services

Monthly Tax Filing

Additional Instructions

1. By signing this form, the proxy is authorized to represent you for the selected Digital Government Services.
2. A separate Authorization Form must be filled out for every Digital Government Service.
3. Fill in all fields, and then print the form. Then both parties must sign the form.
4. The Authorization Form can be uploaded or delivered with a copy of both parties ID's, at the following Government Locations:
 - Tax office
 - Public Service Center (after April 15, 2013)
5. To retract a Authorization Form, you must report to either Government Locations (see 4.)