

Authorizing or Cancelling a Representative

Complete this form to cancel any existing consents or to give consent for us at the Canada Revenue Agency (CRA) to deal with another person (such as your spouse or common-law partner, other family member, or accountant) as your representative for income tax matters. Send this completed form to your tax centre, or call us at **1-800-959-8281** to immediately **cancel** a consent. You can find the address of your tax centre on the attached information sheet. You can also give a consent by providing the requested information online through "Authorize my representative" on our Web site at www.cra.gc.ca/myaccount.

Please read the previous two pages before you start completing this form. Incomplete forms will not be processed.

Note

We will accept a change of address from only **you** or your **legal representative**. If you have recently moved, please call us at **1-800-959-8281** before submitting this form to ensure we have your correct current mailing address.

Part 1 – Client information

Complete this section to identify yourself and to indicate your account number. You will need to complete a **separate copy** of this form for each account.

First name	Last name	Work telephone number	Home telephone number
Individual		Trust	T5
Complete the one that applies:	Social insurance number	Trust account number T	T5 filer identification number HA

Part 2 - Cancelling one or more existing consent(s)

Complete this section **only** to cancel an existing consent. Tick **box A** to cancel **all** consents or tick **box B** to cancel a consent given for an individual and/or firm.

- A.** Cancel **all** consents.
- B.** Cancel the consent(s) given for the individual and/or firm identified below:

Name of individual _____	Name of firm _____
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Note
If you want another representative to be provided with information about the account indicated in **Part 1**, complete **Part 3**.
If not, go to **Part 4**.

Part 3 – Giving consent for a representative

If you are giving consent for an individual, enter the individual's full name, or if you are giving consent for a firm, enter the name of the firm. If you want us to deal with a specific individual in that firm, enter the person's full name. If you do not identify an individual at the firm, you are giving your consent for us to deal with **anyone** from that firm.

Name of individual _____	Name of firm _____
Daytime telephone number _____	Fax number _____
Extension _____	

Authorizing online access

You can authorize your representative to deal with us through our online services for representatives called "Represent a client". You have to provide the **RepID** if your representative is an individual or the **Business Number** if your representative is a business. Our online services do not yet have a year-specific option, so your representative will have access to **all tax years**.

RepID	or	Business Number
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Part 3 - Giving consent for a representative (continued)

Levels of authorization

Level 1 – Disclose

We may **disclose** the following to your representative:

- information given on your tax return;
- adjustments to your tax return;
- information about your registered retirement savings plan, Home Buyers' Plan, and Lifelong Learning Plan;
- your accounting information, including balances, payment on filing, and instalments or transfers;
- information about your benefits and credits (Canada Child Tax Benefit, goods and services tax/harmonized sales tax credit); and
- your marital status (but not information related to your spouse or common-law partner).

Level 2 - Disclose/Request changes

We may **disclose** the information listed in level 1 to your representative, and he or she may **ask for changes** to your account.

Such changes include:

- adjustments to income, deductions, and non-refundable tax credits; and
- accounting transfers.

Note

If you **do not indicate a level** of authorization, we will **assign a level 1**.

Authorizing a new representative **will cancel** all existing representatives on file. If you **do not agree**, tick this box.

Tick **box A** below to give consent for **all** tax years **and** indicate the level of authorization **or** tick **box B** below to give consent for a **specific** tax year or years **and** indicate the level of authorization for **each** tax year.

A. All (past, present, and future) tax years **Level of authorization** (specify either level 1 or 2):

Box B below does not apply to you if you have given online access to a representative.

B. Enter the applicable tax year or years (past and/or present) and indicate the level of authorization for **each** tax year.

Tax year(s)										
Level of authorization										

Note

If this consent is for a **trust account** and the year-end is not December 31, enter the month and day of the year-end:

Month	Day

Expiry date

Enter an expiry date if you want the consent to end at a particular time. Your consent will stay in effect until you cancel it, it reaches the expiry date you choose, or when we are notified of your death.

Consent expiry date

Year	Month	Day

Part 4 – Signature

You or your legal representative (e.g., person with your power of attorney, a guardian, or an executor or administrator of your estate) must sign and date this form. If you are signing and dating this form as the legal representative, send us a copy of the legal document that identifies you as the legal representative, if you have not already done so.

By signing and dating this form, you authorize us to **cancel** the consent(s) indicated in **Part 2** and/or **deal** with the individual and/or firm identified in **Part 3**.

We will not process this form unless it is **signed and dated** by you or your legal representative.

Sign and print name

2007/06/05
Date