

I, give	e the following individual,,
(print client name here)	(print individual name here)
permission to retrieve and have unlimited	access to my tax records and all supporting documents as
obtained from The Old Tax House. I will no	otify this individual that during this process, they must present a
valid photo ID to verify their identity. I und	lerstand that if the photo ID does not match the name I have
provided, my tax file nor the supporting doc	uments will be released.
I give permission to:	
Individual's Name	Relationship to You
to retrieve the above outlined documentatio	n from The Old Tax House on my behalf.
Client/Taxpayer Signature	
******************	***************************************
Photo ID verified by:	
Representa	ative of The Old Tax House
Signature of person records were releas	ed to on behalf of our client:
Signature	