

## Tappan Street Restaurant Group W-2 Request

**Instructions:** This document is a fillable pdf. You can type your responses into this form. If you are unable to type your responses than you will need to print this document and then LEGIBLY write your answers.

You must fax this request **with** your signature to **678-990-8260**. Requests by phone will not be taken. If you are unable to fax this document then you may take it to any TSRG location and they will fax it for you. Please include a reliable call back number in case we have questions. All requests processed in 7-10 days.

Date \_\_\_\_\_ Full (Legal) Name \_\_\_\_\_

SSN \_\_\_\_\_ Daytime Phone Number \_\_\_\_\_

Verify old mailing address  Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

W-2 Year(s) Requesting \_\_\_\_\_

Location (s) Worked In \_\_\_\_\_

*If you worked in multiple locations you must list all.*

Method you want the W-2 delivered to you:  Mail  E-Mail

E-Mail Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*By signing and submitting this request you authorize Tappan Street Restaurant Group to return a copy of your W-2 to you via your requested method. Tappan Street Restaurant Group uses a secure fax and email system to protect your identity for incoming communications. We can not be responsible for the security of the return method that you provide us with and you are to assume all responsibility of the security of your return method.*

### Internal Use Only

Date Completed \_\_\_\_\_ Completed By \_\_\_\_\_ Locations Sent \_\_\_\_\_