

Tennessee Department of Revenue Vehicle Services Division Motor Carrier Section 44 Vantage Way, Suite 160 Nashville, Tennessee 37243-8050

PLEASE COMPLETE THIS FORM IF YOU HAVE AN ACCOUNTING FIRM OR REPORTING SERVICE COMPILE YOUR APPLICATIONS AND RETURNS FOR YOU.

Licensees are required to file returns/applications and pay taxes/fees as it is owed. They are also required to accept and respond to various types of official communications with the Department of Revenue.

If a licensee prefers an Accounting or Reporting firm to fulfill these responsibilities this authorization form is to be completed in its entirety. This is a privilege extended to the licensee which requires special handling by the Department; therefore, such action will not be considered unless this form is properly completed with the Department. The completion of this form does not relieve the licensee of the legal obligations associated with a particular license. The licensee is ultimately responsible for the payment of the tax/fee as well as all acts and omissions of the stated Accounting or Reporting firm.

Power of Attorney

KNOW ALL MEN BY THESE PRESENT, that the undersigne	d principal and licensee has made and appointed, and does
hereby make and appoint (Firms Name)	
or agents or employees with office at (Mailing Address)	
(Phone Number)	, to act as Attorney-in-Fact for the undersigned, who makes
this appointment either personally or in an authorized representation or other entity; this power of attorney shall be limited to the foliandicated:	

To prepare, sign, and file applications with the Department of Revenue.

To prepare, sign, and file with the Department of Revenue tax returns or reports as required by Tennessee.

To take legal notice of all delinquencies, cancellation listings and official mailings prepared and sent by the Department of Revenue.

To take legal notice of all tax rate/fee changes.

To preserve all records required to be kept by the principal for the statutory period of time.

To respond to communications when such responses are requested by the Department of Revenue.

To take legal notice of all Notices of Intent to Audit.

To present to officials of the Department of Revenue all records requested to be inspected.

To cooperate and assist officials of the Department of Revenue while they are conducting all audits.

To take legal notice of all Notices of Assessments.

This Power of Attorney does not allow the authorized representative to collect refunds owed to the licensee by the State of Tennessee.

IN WITNESS WHEREOF, the undersigned has caused these presents to be executed, for benefit of the principal named below. LICENSE(S) LICENSE(S) NUMBER PREVIOUSLY ASSIGNED **IRP** PRINCIPALAND LICENSEE BY: ACCOUNTING OR REPORTING FIRM BY: Company Name Company Name Signature of Owner/Legal Representative Signature of Owner/Legal Representative Title Title Address - Mailing Address - Mailing City/State City/State Phone Number Phone Number

State of							
County of							
On this	day of	month	,	year	_ before me the ur	ndersigned, a Notai	ry Public for the
state of	of state of			personally			
appeared known the same in cap	-	whose name is	subscribed to	the withi	n instrument, and a	cknowledge to me	that she/he executed
IN WITNESS WI	HEREOF, I have s	set my hand and s	seal this		day of		
this certificate at						month	year
				_			
Notary Public				My Commission Expires			