Declaration to Revenue - Authorisation Form PAYE A2

For information on how an agent can use Revenue systems on your behalf, please see 'Using a tax agent or tax service' on www.revenue.ie.



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I understand that any refund made by the Revenue C		
(insert name of tax agency),	on my behalf	is refunded in a similar manner
as if same were being refunded directly to me and that	at once the re	fund is transferred into the bank
account nominated by me I have no further call upon		•
I understand that (insert name of	of tax agency)) is acting as my agent and is solely
responsible to me in respect of any refund received b	y them on my	behalf. I further understand that my
agent(insert name of	of tax agency)	is an independent entity and that the
Revenue Commissioners make no endorsement of m	y agent or an	y such agency and cannot accept any
responsibility whatsoever for problems encountered by	y me in dealii	ng with them.
I understand and agree that	(inse	rt name of tax agency) will input its own
bank account details on the Revenue record for the d	uration of this	mandate and will remove these details
on the cessation of the mandate.		
I confirm that I am aware of, and agree to, the payme	nt of the fees	charged by
(insert name of tax agency) in respect of the services	carried out or	n my behalf and that this fee will be
deducted from any amount refunded by Revenue and	I that the bala	nce of this amount will be paid to me.
3. Terms and Conditions of Authorisation		
I understand that Tax law provides for both civil penal	ties and crimi	nal sanctions for the failure to make
a return, the making of a false return, facilitating the n	naking of a fal	lse return, or claiming tax credits,
allowances or reliefs which are not due.		
I confirm that I will provide the necessary documentat	ion to	(insert
name of tax agency) to support any refund, credit clai	ms or claims	for allowances and reliefs made to
Revenue on my behalf by	(insert	name of tax agency).
I confirm that I will provide details of all my sources of	f income to	(insert
name of tax agency).		
I understand that the person selected in Section 1 about	ove is require	d to retain all documentation relating
to any refund or credit or allowance or relief claimed by	by the agent o	on my behalf for a period of 6 years
beginning at the end of the year of assessment to wh	ich the Returr	of Income and / or claim relates and
that (insert name of		
Revenue upon request.	3	
Signed	(Client)	Date // // //
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Signed	(Agent)	Date//