STATEMENT OF AUDIT PROCEDURE

AGREEMENT TO AUTHORIZE ELECTRONIC EXCHANGE OF TAX INFORMATION

I. BACKGROUND

Auditors typically exchange information with taxpayers or their representatives during the course of an audit. A taxpayer may prefer to have certain information exchanged using e-mail, web sites, or other internet-based service (hereinafter referred to as “the electronic exchange of information”).

II. SCOPE

This Statement of Audit Procedure provides guidance to auditors on the proper procedures concerning the electronic exchange of information.

III. PROCEDURE

At the beginning of the audit, the auditor will explain to the taxpayer or representative the Department’s procedures for the electronic exchange of information.

Any taxpayer or representative requesting the electronic exchange of information must complete the AGREEMENT TO AUTHORIZE ELECTRONIC EXCHANGE OF TAX INFORMATION (attached). This Agreement sets forth all of the rights and responsibilities of all parties, and must signed, notarized and be returned to the auditor before any information can be exchanged electronically.

In addition to explaining the terms of the Agreement, the auditor will advise the taxpayer or representative that any information the Department of Finance receives exclusively from the Internal Revenue Service and/or the New York State Department of Taxation and Finance is not covered by this Agreement and cannot be transmitted by the Department of Finance to the taxpayer.
AGREEMENT TO AUTHORIZE ELECTRONIC TRANSMITTAL OF TAX INFORMATION

Name of Taxpayer: ____________________________________________
Type(s) of Tax: ____________________________________________
Taxpayer’s FIRST NAME LAST NAME
E-mail Address: ____________________________________________
Taxpayer’s Phone Number: (_______) _________________________
Fax Number: (_______) ______________________________
Name of Representative: ______________________________________
Representative’s FIRST NAME LAST NAME
E-mail Address: ____________________________________________
Representative’s Phone Number: (_______) _________________________
Fax Number: (_______) ______________________________
Effective Date of Agreement: _______ / _______ / _______
End Date of Agreement: _______ / _______ / _______

The Taxpayer hereby authorizes the New York City Department of Finance (“DOF”) to transmit tax secret information pertaining to the Taxpayer with the Taxpayer or the Taxpayer’s Representative using e-mail, web sites, or other internet-based service (hereinafter referred to as “the electronic transmittal of information”).

DOF is agreeing to the electronic transmittal of information solely for the convenience of the Taxpayer or the Taxpayer’s Representative. The tax secret information that will be transmitted in such manner may include the Taxpayer’s tax returns or information contained in Taxpayer’s tax returns. Applicable provisions in the New York City Administrative Code prohibit the disclosure by DOF of tax secret information.

DOF has written security procedures relating to transmitting information with members of the public using e-mail, web sites, or other internet-based service, of which the Taxpayer and Taxpayer’s Representative may have a copy upon request. DOF does not represent or promise that these procedures are adequate to preserve the secrecy of tax secret information transmitted in such manner.

The Taxpayer and the Taxpayer’s Representative hereby release The City of New York (“City”) from any and all liability, and the Taxpayer agrees to indemnify and hold the City harmless from any damage, arising out of the electronic transmittal of information.

CERTIFICATION

Signature of Taxpayer: _______________________________________
Dated: _______ / _______ / _______
Signature of Taxpayer’s Representative: _________________________
Dated: _______ / _______ / _______

ACKNOWLEDGEMENT OF TAXPAYER’S SIGNATURE

On this ______ day of ____________, 20___, before me came _________________________,
FIRST NAME LAST NAME
to me known, who swore that (s)he is the person described in the above instrument as the Taxpayer, and acknowledged that (s)he executed the above instrument.

____________________________________
Notary Public

Note: If the Taxpayer or the Taxpayer’s Representative is not an individual, then the following signature format should be used:

Signature of Taxpayer (or Taxpayer’s Representative): __________________________

By: ____________________________________________ Title: __________________________
PRINT FIRST AND LAST NAME OF SIGNER