

### Tax Information Authorization

▶ Go to [www.irs.gov/Form8821](http://www.irs.gov/Form8821) for instructions and the latest information.  
 ▶ Don't sign this form unless all applicable lines have been completed.  
 ▶ Don't use Form 8821 to request copies of your tax returns or to authorize someone to represent you. See instructions.

OMB No. 1545-1165  
**For IRS Use Only**  
 Received by: \_\_\_\_\_  
 Name \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Function \_\_\_\_\_  
 Date \_\_\_\_\_

**1 Taxpayer information.** Taxpayer must sign and date this form on line 6.

Taxpayer name and address	Taxpayer identification number(s)
	Daytime telephone number
	Plan number (if applicable)

**2 Designee(s).** If you wish to name more than two designees, attach a list to this form. **Check here if a list of additional designees is attached** ▶

Name and address Kari L. Pel 10833 Valley View Street Suite 520 Cypress, CA 90630	CAF No. 0314-20635R PTIN P00120714 Telephone No. 714-526-2668 Fax No. 866-279-4916
<b>Check if to be sent copies of notices and communications</b> <input checked="" type="checkbox"/>	Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
Name and address	CAF No. _____ PTIN _____ Telephone No. _____ Fax No. _____
<b>Check if to be sent copies of notices and communications</b> <input type="checkbox"/>	Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>

**3 Tax information.** Each designee is authorized to inspect and/or receive confidential tax information for the type of tax, forms, periods, and specific matters you list below. See the line 3 instructions.

By checking here, I authorize access to my IRS records via an Intermediate Service Provider.

(a) Type of Tax Information (Income, Employment, Payroll, Excise, Estate, Gift, Civil Penalty, Sec. 4980H Payments, etc.)	(b) Tax Form Number (1040, 941, 720, etc.)	(c) Year(s) or Period(s)	(d) Specific Tax Matters
INCOME	1040	2021	

**4 Specific use not recorded on the Centralized Authorization File (CAF).** If the tax information authorization is for a specific use not recorded on CAF, check this box. See the instructions. If you check this box, skip line 5 . . . . . ▶

**5 Retention/revocation of prior tax information authorizations.** If the line 4 box is checked, skip this line. If the line 4 box isn't checked, the IRS will automatically revoke all prior tax information authorizations on file unless you check the line 5 box and **attach a copy** of the tax information authorization(s) that you want to retain . . . . . ▶   
 To revoke a prior tax information authorization(s) without submitting a new authorization, see the line 5 instructions.

**6 Taxpayer signature.** If signed by a corporate officer, partner, guardian, partnership representative (or designated individual, if applicable), executor, receiver, administrator, trustee, or individual other than the taxpayer, I certify that I have the legal authority to execute this form with respect to the tax matters and tax periods shown on line 3 above.

▶ **IF NOT COMPLETED, SIGNED, AND DATED, THIS TAX INFORMATION AUTHORIZATION WILL BE RETURNED.**  
 ▶ **DON'T SIGN THIS FORM IF IT IS BLANK OR INCOMPLETE.**

Signature	Date
Print Name	Title (if applicable)

# ***Pel & Associates “Care Plan”***

*(optional)*

The number of notices the IRS is sending out to taxpayers has increased in recent years. With the addition of the Economic Impact Payments and Advanced Child Tax Credits, we anticipate an increase in volume of IRS communication. Therefore, there is a much greater chance that you may have to engage in correspondence with the IRS.

***Consider joining the Pel & Associates “Care Plan”***  
***Cost = \$25 for one year***

## **Benefits:**

- Ø Pel & Associates should receive a copy of the notice around the same time, and maybe even BEFORE, you receive your notice. In many cases we will have already prepared a response before we communicate with each other. This will help ensure a timely response to the IRS.
- Ø In most cases, we will prepare the IRS response for free if we prepared the original return and you have elected to participate in the “Care Plan.” (Please note exceptions below). Without the “Care Plan,” responses that we prepare may range from \$50 - \$150.
- Ø The “Care Plan” will also cover State inquiries, if we prepared the original return.

## **Exceptions:**

- Ø Audit Representation (Correspondence and In-Person Audits). An audit refers to a situation where you are required to prepare documentation (i.e. receipts) to prove expenses or income reported on a tax return. You may be asked to mail or fax information in, or you may need to set up an appointment with an IRS agent. As Enrolled Agents, we can represent you. However, this is beyond the scope of what is included in the “Care Plan.” If you are seeking audit representation, please call the office and we can arrange a fee based on the scope of the audit and the time required to represent you. We have been successful representing our clients before the Internal Revenue Service in the past and we are confident that we can be of great assistance to you.
- Ø Amended Returns. If an amended return is required to resolve the situation, additional fees will be negotiated.
- Ø Additional Meetings. If more than one in-person meeting is required to resolve the situation, additional fees will be negotiated.

## **HOW TO SIGN UP:**

***If you are interested in joining the Pel & Associates “Care Plan” for the 2021 tax year, please fill out and sign the IRS Form 8821 located on the reverse side and include with your tax documentation. You may also visit our website to obtain a copy at [www.pelandassociates.com](http://www.pelandassociates.com) under “Care Plan”. If you are filing a Married Filing Joint tax return, each spouse will need to fill out and sign a separate Form 8821.***