

Inland Revenue Department Authority

Name:

IRD Number:

I/We hereby authorise HSW Limited or its employees to access all information other than child support on my/our behalf, by phone, internet, fax or e-services. This authority extends to all forms of Tax types dealt with by the Inland Revenue Department. In addition I/we acknowledge that HSW Limited or its employees may obtain information from the Inland Revenue Department through all channels, including electronic ones and I/we authorise that the Inland Revenue Department shall communicate with HSW or its employees.

I/We acknowledge that HSW Limited and its employees are acting on an Agency basis and that I/we are responsible for any obligations to the Inland Revenue Department.

I/We acknowledge that this authority shall remain in place until such time it is revoked by me/us.

Signed

Dated