

- **Complete this form to nominate someone (for example, a family member or company's staff member) to act on your behalf with Inland Revenue. This includes making enquiries, receiving your statements, refunds and other correspondence. Having a nominated person does not change your responsibilities. You are still responsible for your own tax affairs, so you need to make sure that any returns are filed and tax paid by the due date.**
- **Use the space available on the back of this form if you need to nominate more than one person.**
- **For individuals**, a nominated person can only be chosen by the person whose account the nominated person will have authority.
- **For a non-individual**, a nominated person (for example, payroll clerk or office administrator) can only be set up by a company director, a trustee or estate administrator, or an executive officer.
- To protect your privacy and security we can only discuss your tax affairs and/or child support with you or the person you nominate to act on your behalf (your nominee).
- **Child support customers** will need to complete an *Elect someone to make child support enquiries on your behalf (IR146)* form. To order a copy, phone Child Support on 0800 221 221

Your first name(s)	<input type="text"/>	Your surname	<input type="text"/>
Your IRD number	<input type="text"/>	Your phone number	( <input type="text"/> ) <input type="text"/>
		(8 digit numbers start in the second box. 1 2 3 4 5 6 7 8 )	
Your postal address (We need this information to validate the nomination)	<input type="text"/>		
<input type="text"/>			

<b>Non-individuals only</b>	<input type="text"/>		
Organisation's name			
Organisation's IRD number	<input type="text"/>	Nominator's position (eg director)	<input type="text"/>

**Please provide details of the person who will act on your behalf**

Your nominee's first name(s)	<input type="text"/>	Your nominee's surname	<input type="text"/>
Your nominee's IRD number	<input type="text"/>	Your nominee's phone number	( <input type="text"/> ) <input type="text"/>
Your nominee's postal address	<input type="text"/>		
<input type="text"/>			
Position occupied – non-individuals (eg office administrator)	<input type="text"/>		

**Show which accounts your nominee will act on your behalf for and how long they will act for**

		Start date			End date		
		Day	Month	Year	Day	Month	Year
Please tick:	<input type="radio"/> Working for Families Tax Credits*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• the appropriate circles	<input type="radio"/> Fringe benefit tax	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• complete dates you want your nominee to act on your behalf by completing the start date and end date boxes.	<input type="radio"/> Goods and services tax	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
If you want them to act indefinitely leave the end date blank	<input type="radio"/> Income tax	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
You can end a nominated person's authority at any time by phoning us on 0800 227 774 (individuals) or 0800 377 774 (business).	<input type="radio"/> PAYE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="radio"/> Rebate claims	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="radio"/> Student loan	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="radio"/> KiwiSaver	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="radio"/> Other <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	(please specify)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Your signature	<input type="text"/>	/	/	Date
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\*Previously known as family assistance

**Please provide details of the person who will act on your behalf**

Your nominee's first name(s)

Your nominee's surname

Your nominee's IRD number

Your nominee's phone number ( )

Your nominee's postal address

Position occupied – non-individuals  
(eg office administrator)

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Please tick:

- the appropriate circles
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Your signature

Date

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Your nominee's first name(s)

Your nominee's surname

Your nominee's IRD number

Your nominee's phone number ( )

Your nominee's postal address

Position occupied – non-individuals  
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