



# Form IL-2848

## Power of Attorney



Check **one** box (See instructions)  **Add:** New POA  **Add:** Additional POA  **Change:** Existing POA  **Remove:** Existing POA

### Step 1 - Taxpayer Information

Taxpayer's name (person or business)

FEIN, SSN, or Illinois Account ID

Spouse's name (if joint income tax return)

Spouse's SSN (if joint income tax return)

Taxpayer's Street Address

City

State

ZIP

Taxpayer Phone Number

Taxpayer's Email address

Check this box if your authorized agent (corporate officer, partner, or individual on behalf of the taxpayer) or fiduciary is executing this form **and** complete Step 4 in addition to Steps 1, 2, 3, 5, and 6.

### Step 2 - Power of Attorney Information

Form IL-2848-A attached \_\_\_\_\_ How many Forms IL-2848-A are attached?

Check **one** box:

Attorney

Certified Public Accountant

Enrolled Agent

Other (Complete Step 6)

Power of Attorney's name

Firm Name

Identification Number (Attorney License, PTIN, FEIN, SSN)

Email Address

Power of Attorney's Street Address

City

State

ZIP

( \_\_\_\_\_ )

Daytime Phone Number

( \_\_\_\_\_ )

Fax Number

Check this box to authorize IDOR to send duplicate copies of notices to the Power of Attorney listed here.

### If your Power of Attorney is an attorney, certified public accountant, or enrolled agent, the Power of Attorney must complete this section:

I declare that I am not currently under suspension or disbarment, and that I am

- a member in good standing of the highest court of the jurisdiction indicated;  
or
- duly qualified to practice as a certified public accountant in the jurisdiction indicated;  
or
- enrolled as an agent pursuant to the requirements of United States Treasury Circular #230.

Power of Attorney Signature

Date

Power of Attorney Printed Name

Jurisdiction

### Step 3 - Authority Granted

I grant the above person, and anyone included in the attachment,

**full** authority, authorizing them to act on my behalf in all tax matters with IDOR.

**limited** authority (check only the boxes that apply). By checking boxes, the appointee(s) will be authorized to act on my behalf only for the indicated tax matters. If I do not indicate a specific year, period, or Audit ID for a selected tax type, I am granting authority for all years or periods.

Tax Type	Years/Periods/Audit ID
<input type="checkbox"/> Individual Income Tax	_____
<input type="checkbox"/> Withholding Income Tax	_____
<input type="checkbox"/> Excise Tax	_____
<input type="checkbox"/> Business Income Tax	_____

Tax Type	Years/Periods/Audit ID
<input type="checkbox"/> Sales and Use Tax	_____
<input type="checkbox"/> Vehicle Use Tax (RUTs)	_____
<input type="checkbox"/> NPL/1002D	_____
<input type="checkbox"/> Specific Authority Granted. Attach Form IL-2848-B.	

Check this box if the appointee(s) is not authorized to sign tax return.



**Step 4 - Authorized Agent/Fiduciary**

If you checked the box in Step 1 indicating that your authorized agent (corporate officer, partner, or individual on behalf of the taxpayer) or fiduciary is executing this form, complete this Step in addition to Steps 1, 2, 3, 5, and 6.

\_\_\_\_\_  
Corporate Officer, Partner, Individual, or Fiduciary Name

\_\_\_\_\_  
Title (Corporate Officer, Partner, Individual, or Fiduciary)

\_\_\_\_\_  
Email Address

( \_\_\_\_\_ )  
\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State ZIP

**Step 5 - Signature**

This form must be signed by the taxpayer(s) listed in Step 1 unless it is being signed by an authorized agent (corporate officer, partner, or individual on behalf of the taxpayer) or fiduciary who certifies: "That I have the authority to execute this power of attorney on behalf of the taxpayer." **Note:** If the Other box in Step 2 of this form or in any section of Form IL-2848-A, is checked, this section **must** be signed in front of the witnesses or notary as documented in Step 6.

\_\_\_\_\_  
Taxpayer (Authorized Agent/Fiduciary) Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse's Signature (required if listed in Step 1)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

**Step 6 - Witness (if applicable)**

If you checked the Other box in Step 2 of this form or in any section of Form IL-2848-A, this section must be completed. This section must be signed by two witnesses **or** notarized for the form to be considered complete.

Any person, signing in Step 5, as or for the taxpayer,

is known by (and this document is signed in the presence of) two disinterested witnesses whose printed names and signatures appear here

\_\_\_\_\_  
Signature of Witness Date

\_\_\_\_\_  
Signature of Witness Date

\_\_\_\_\_  
Printed Name of Witness

\_\_\_\_\_  
Printed Name of Witness

**OR**

appeared this day before a notary public and acknowledged, by signing in my presence, this power of attorney as his or her voluntary act and deed

\_\_\_\_\_  
Signature of Notary Public Date

**Notary Seal**