

**Individual or Fiduciary
Power of Attorney Declaration****3520-PIT**

Use this legal document to authorize a specific individual(s) to receive confidential information and represent you in all matters before the Franchise Tax Board (FTB).

Part I - Taxpayer Information

Check only one box below.

☐**Individual**

(If a joint tax return is filed, each spouse/Registered Domestic Partner (RDP) must complete their own POA Declaration)

☐**Fiduciary**(Estate or Trust - **FEIN** required)

Individual (first name, middle initial, last name, suffix) or name of estate or trust

SSN or ITIN

Street address (number and street) or PO box

Apt. no/ste. no.

FEIN

City (If you have a foreign address, see instructions)

State

ZIP code

Phone

Foreign country name

Foreign province/state/county

Foreign postal code

Part II - Representative(s)

Only individuals may be named as representatives. You must list a primary representative below. The individual or fiduciary in Part I appoints the following individual(s) as attorney(s)-in-fact. To appoint additional representatives, complete Side 4. Each representative listed on your power of attorney (POA) will have the ability to remove a representative from your POA Declaration.

Primary representative's name (first name, middle initial, and last name)

CA CPA

CA state bar number

CTEC

Enrolled agent number

PTIN

Street address (number and street) or PO box

Apt. no/ste. no.

City (If the representative has a foreign address, see instructions.)

State

ZIP code

Email (include your representative's email address to ensure they receive email notifications)

Phone

Fax

Additional representative's name (first name, middle initial, and last name)

CA CPA

CA state bar number

CTEC

Enrolled agent number

PTIN

Street address (number and street) or PO box

Apt. no/ste. no.

City (If the representative has a foreign address, see instructions.)

State

ZIP code

Email (include your representative's email address to ensure they receive email notifications)

Phone

Fax