

DIVINE TAX SOLUTIONS

TAX PREPARATION INTAKE FORM

FILING STATUS:		ADDRESS:	
<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED FILING JOINT <input type="checkbox"/> MARRIED FILING SINGLE <input type="checkbox"/> HEAD OF HOUSEHOLD <input type="checkbox"/> QUALIFYING WIDOWER		STREET: _____ CITY: _____ STATE/ZIP: _____ COUNTY: _____ SCHOOL CODE: _____ (IF APPLICABLE)	
TAXPAYER		TAXPAYER #2	
SSN #: _____ - _____ - _____ DATE OF BIRTH: ____/____/____ LAST NAME: _____ FIRST NAME: _____ MI: _____ CONTACT INFORMATION: PHONE: _____ EMAIL: _____ OTHER INFORMATION: OCCUPATION: _____ DEPENDENT OF OTHERS: YES NO LEGALLY BLIND? YES NO DATE OF DEATH: ____/____/____ (IF APPLICABLE)		SSN #: _____ - _____ - _____ DATE OF BIRTH: ____/____/____ LAST NAME: _____ FIRST NAME: _____ MI: _____ CONTACT INFORMATION: PHONE: _____ EMAIL: _____ OTHER INFORMATION: OCCUPATION: _____ DEPENDENT OF OTHERS: YES NO LEGALLY BLIND? YES NO DATE OF DEATH: ____/____/____ (IF APPLICABLE)	
DEPENDENTS:			
First/Middle/Last Name	DATE OF BIRTH	SOCIAL SECURITY NUMBER	RELATIONSHIP

If you believe your tax information has been disclosed or used improperly in a manner unauthorized by law or with out your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) be telephone at (800) 366-4484, or by email at atcomplaints@tigta.treas.gov

DIVINE TAX SOLUTIONS

CONSENT TO USE RETURN INFORMATION

Federal law requires this consent form be provided to you ("you" refers to each taxpayer, if more than one). Unless authorized by law, we cannot use, without your consent, your tax return information for purposes other than the preparation and filing of your tax return.

You are not required to complete this form. If we obtain your signature on this form by conditioning our services on your consent, your consent will not be valid. Your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year.

If you do not consent, then you may still have your tax return prepared and electronically filed by us for a fee.

For your convenience, we have entered into arrangements with a bank to provide qualifying taxpayers with the opportunity to apply for a Refund Anticipation Loan (RAL), or a Preferred Electronic Refund Check (PERC) or an Electronic Refund Deposit (ERO). To determine whether these products may be available to you, we will need to use your tax return information by analyzing it and calculating the amount of your anticipated refund.

If you would like us to use your tax return information to determine whether these products may be available to you while we are preparing your return, please sign and date this consent to the use of your tax return information.

By signing below, you (including each of you if there is more than one taxpayer) authorize us to use the information you provide to us during the preparation of your 2020 tax return to determine whether to present you with the opportunity to apply for these products and services.

TAXPAYER NAME (PRINT ONLY)	TAXPAYER SIGNATURE:	TODAYS DATE:
JOINT TAXPAYER NAME (PRINT ONLY)	JOINT TAXPAYER SIGNATURE:	TODAYS DATE:

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DIVINE TAX SOLUTIONS

CONSENT TO DISCLOSURE OF TAX RETURN INFORMATION

(Printed name of Tax Preparer) _____ ("we," "us" and "our")
Federal law requires this consent form be provided to you ("you" refers to each taxpayer, if more than one). Unless authorized by law, we cannot disclose, without your consent, your tax return information to third parties for purposes other than the preparation and filing of your tax return. If you consent to the disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution. You are not required to complete this form. If we obtain your signature on this form by conditioning our services on your consent, your consent will not be valid. If you agree to the disclosure of your tax return information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year.

In order to process your tax return, we must disclose all of your 2020 tax return information to Divine Tax Solutions, LLC that we utilize in order to provide certain services.

If you will allow us to disclose your 2020 tax return information to Divine Tax Solutions, LLC for this purpose, sign and date your consent to the disclosure of your tax return information.

By signing below, you (including each of you if there is more than one taxpayer) authorize us to disclose to Divine Tax Solutions, LLC all of your 2020 tax return information. If you are not willing to authorize us to share your tax information with the other firms, you can still choose to have your tax return prepared and filed by us for a fee.

TAXPAYER NAME (PRINT ONLY)	TAXPAYER SIGNATURE:	TODAYS DATE:
JOINT TAXPAYER NAME (PRINT ONLY)	JOINT TAXPAYER SIGNATURE:	TODAYS DATE:

If you believe your tax information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at (800) 366-4484, or by email at atcomplaints@tigta.treas.gov