Declaration to the Revenue Commissioners of Ireland (authorisation Form PAYE A1).

1. Authorisation to act as agent

т				
I, (first name, surname)				
Date of Birth:				
PPS Number:				
	4H, with an address at 11 Hawthorn Wood, in dealing with all aspects of the filing of my bmission of refund or credit claims,			
I confirm that this authorisation will remain in force until Revenue is formally notified of its cessation by either myself or the TRO Accountancy.				
2. Terms and Conditions of Authorisation				
I understand that Tax law provides for both civil penalties and criminal sanctions for the failure to make a return, the making of a false return, facilitating the making of a false return, or claiming tax credits, allowances or reliefs which are not due. I confirm that I will provide the necessary documentation to the TRO Accountancy to support any refund, credit claims or claims for allowances and reliefs made to Revenue on my behalf by TRO Accountancy. I confirm that I will provide details of all my sources of income to the TRO Accountancy. I understand that TRO Accountancy is required to retain a copy of all documentation relating to any refund or credit or allowance or relief claimed by the agent on my behalf and that the agent will be required to produce same to Revenue upon request.				
Signed:Client	Date:			
Signed:Agent	Date:			

CUSTOMER/AGENT AGREEMENT

T.R.O. Accountancy - Services we provide - No refund no fee!

- When registered as your agent and received from you all receipts and documents we will submit the request for your refund to the Revenue Commissioners within 3 working days.
- As soon as the Revenue Commissioners review the request a statement will be issued. Once we receive the statement we will check the details and notify you of the result and of the refund due to you.

I confirm the following:

- 1. I authorise T.R.O. Accountancy to be the exclusive agent for Revenue Commissioners and Department of Social and Family Affairs for previous four years and the current year.
- 2. I have not, for the mandated tax years, (a) approached or applied to the Revenue Commissioners about these tax affairs or been refused by them for any reason, or, (b) authorised any other party to do so on my behalf.
- 3. To provide accurate information and disclose all relevant facts regarding income, taxes, personal circumstances and assets for the correct calculation and preparation of tax returns.
- 4. I understand that the Irish tax authorities will make the final decision on the value of any refund due or any balance due to them by me and that any estimation given by T.R.O. Accountancy, is an estimation, not a guarantee.
- 5. I take full responsibility for any discrepancies in the information provided.
- 6. I agree to a commission of 15% + VAT on any tax refunds I receive, subject to a minimum processing fee of €40 + handling fee.

For example: By a refund of € 1000 you will pay 15% = € 150 +23% from €150 = € 34.50Total € 184.50

- Should I avail of any additional services, I understand additional fees may apply.
- 7. I authorise T.R.O. Accountancy to receive all correspondence about my tax affairs and respond as appropriate.
- 8. I authorise T.R.O. Accountancy to deduct the agreed commission from my Bank Account by direct debit.
- 9. If I receive a tax refund from any other source, besides T.R.O. Accountancy, I agree to pay the agreed commission within 5 working days. After this period outstanding amounts will be subject to interest by virtue of the Statutory Interest on Late Payments (Commercial Transactions) Regulations 2002.

Name in Print			
Signature			
Phone no			
Date	//	Agent name	

Please print out, complete and sign both forms and send them by:

- as a scanned e-mail attachment to <u>office@tro.ie</u>
- or post it to: Tax Refunds Online
 11 Hawthorn Wood
 Suncroft
 Co. Kildare