



Georgia Department of Revenue
Disclosure Authorization Form
 Submit this form to the Department employee handling your inquiry.

Section 1 Taxpayer Information

Taxpayer Name	SSN/FEIN	Telephone Number
Spouse's Name (if joint income tax return)	Spouse's SSN (if applicable)	Telephone Number (if applicable)
Mailing Address		
Spouse's Mailing Address (if different from above)		

Section 2 Appointee Information

Name of Appointee GEORGIA WIC PROGRAM-VEND MGMT	Telephone Number (404) 657-2900	Email Address wic-vendor.relations@dph.ga.gov
Mailing Address 200 PIEDMONT AVENUE, SE / WEST TOWER / ATLANTA, GA 30334		

Section 3 Tax Matters

The appointee is authorized to receive confidential information for the tax matter(s) listed below:

Tax Type	Tax Year(s) or Period(s)
Individual Income Tax	
Sales and Use Tax	10/01/2023-09/30/2025
Corporate Income Tax	
Withholding Tax	
Other (specify)	

Section 4 Signature of Taxpayer

I hereby certify that the Georgia Department of Revenue is authorized to disclose and/or discuss confidential information or records concerning the undersigned taxpayer to the appointee named above for the tax type(s) and period(s) listed above. If signed by a corporate officer, partner, member, trustee, or executor/executrix on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer. I understand that to willfully prepare or present a document that is fraudulent or false is a felony under O.C.G.A. § 16-10-20.

Signature	Print Name	Date	Title (if corporate officer)
Spouse's Signature	Print Spouse's Name	Date	

Acknowledgement of Disclosure Authorization. The person(s) signing as the taxpayer above appeared this day before a notary public and acknowledged this Disclosure Authorization Form as a voluntary act and deed.

Sworn and subscribed before me this _____ day of _____, 20_____.

Signature of Notary	Notary Seal
---------------------	-------------

Section 5 Expiration Upon Disclosure (For Internal Department Use Only)

This disclosure authorization form will automatically expire once the Department has disclosed all applicable information to the appointee.

Employee Making Disclosure:	Date of Disclosure:
-----------------------------	---------------------

Form RD-1062 Disclosure Authorization Form

Purpose of Form

A taxpayer may use Form RD-1062 to authorize the Georgia Department of Revenue to disclose confidential tax information to an appointee for a specific tax type(s) and period(s). Form RD-1062 cannot be used as a Power of Attorney (see Form RD-1061) and thus does not grant the appointee any powers of representation. Taxpayers should only use this form when submitting a specific request for a one-time disclosure of information.

Filing Instructions

Submit Form RD-1062 to the Department employee handling your inquiry.

Specific Instructions

Section 1 – Taxpayer Information

Enter the name, address, and any applicable identification numbers of the taxpayer. If the taxpayer is an individual, enter the full Social Security number (SSN). If the taxpayer is a business entity, enter the Federal Employer Identification Number (FEIN). If the taxpayer is granting access to a joint return, enter the spouse's name, address, and full SSN.

Section 2 – Appointee Information

Enter the appointee's name, address, and contact information. An appointee must be an individual, not a business entity. If designating authority to more than one appointee, file an additional Form RD-1062.

Section 3 – Tax Matters

Enter the tax type(s) and specific period(s) or year(s) for which the authorization is granted. A general reference to "all years" or "all periods" or future dates is not acceptable.

Section 4 – Signature of Taxpayer

The taxpayer must sign in Section 4 for Form RD-1062 to be effective. The table below shows who should sign for each type of taxpayer:

Taxpayer	Who Must Sign
Individuals	The individual/sole proprietor must sign (if granting access to a joint return, spouse must also sign).
Corporations	A corporate officer with authority to sign.
Partnerships	A partner having authority to act in the name of the partnership must sign.
Limited Liability Companies	A member having authority to act in the name of the company must sign.
Trusts	A trustee must sign.
Estates	An executor/executrix of the personal representative of the estate must sign.

This Form RD-1062 must be notarized unless it is being presented by a federal agent who is verified by the Department.

Section 5 – Expiration Upon Disclosure

A Form RD-1062 may only be used for a one-time disclosure of certain tax information. Thus, Form RD-1062 will expire upon disclosure to the appointee. For any subsequent disclosures, a new Form RD-1062 must be filed.

It is important to note that the filing of a Form RD-1062 disclosure authorization **will not** revoke any Power of Attorney (Form RD-1061) or Reporting Agent Authorization (Form RD-1063) that is in effect.