



AUTHORIZING OR CANCELLING A REPRESENTATIVE

Complete this form to give the Canada Revenue Agency (CRA) your consent to deal with another person (such as your spouse or common-law partner, other family member, friend, or accountant) as your representative for income tax matters or to cancel any existing representatives on your file. Send this completed form to your CRA tax centre, or call us at **1-800-959-8281** to **immediately cancel** a consent. You can find the address of your tax centre on the attached information sheet. You can also give or cancel a consent by providing the requested information online through "Authorize my representative" on our Web site at **www.cra.gc.ca/myaccount**.

Note

We will accept a change of address only from **you** or your **legal representative**. If you have recently moved, visit **My Account** on our Web site, or call us at **1-800-959-8281** before submitting this form to ensure we have your current mailing address.

Part 1 - Taxpayer information

Complete this part to identify yourself and to give your account number. You will need to complete a **separate copy** of this form for each account.

First name

Last name

Individual

Social insurance number

Work telephone number

Home telephone number

Part 2 - Giving consent for a representative

You must complete a separate Form T1013 for each representative.

- If you are giving consent for an individual, enter the person's full name. To grant this individual online access, also enter his or her RepID.
- If you are giving consent for a group, enter the group's name. To grant this group online access, also enter its **GroupID**.
- If you are giving consent for an business, enter the name of the business. To grant this business online access, also enter its **Business Number (BN)**.

Authorizing online access

Our online services do not have a year-specific option, so your representative will have access to **all tax years**.

You must write the name of the **individual, group, or business** in the box below **and** include the RepID, GroupID **or** BN to grant online access.

Name of individual:

Nicholas Sider CGA, PC

Name of group:

Name of business:

Nicholas Sider CGA, PC

Telephone:

(416) 913-9243

Ext: _____

Fax:

(416) 406-4805

To grant online access

RepID

or

GroupID

G _____

or

Business number

Your representative must have registered the BN with the CRA "**Represent a client**" service.

Part 3 - Levels of authorization

Tick either:

- **Box A** below to give consent for **all** tax years **and** specify the level of authorization; or
- **Box B** below to give consent for a **specific** tax year or years **and** specify the level of authorization for **each** tax year.

Note

If you **do not specify a level** of authorization, we will **assign a level 1**.

A. All (past, present, and future) tax years. Level of authorization (level 1 or 2): Level 2

Box B below does not apply if you have given online access to a representative.

B. Enter the applicable tax year or years (past and/or present), and specify the level of authorization (level 1 or 2) for **each** tax year.

Tax year(s)	_____	_____	_____	_____	_____	_____	_____	_____	_____
Level of authorization	_	_	_	_	_	_	_	_	_

Expiry date

Enter an expiry date if you want the consent to end at a particular time. Your consent will stay in effect until you cancel it, it reaches the expiry date you choose, or we are notified of your death.

Year Month Day
Consent expiry date _____

Part 4 - Cancelling one or more existing consents

Complete this section **only** to cancel an existing consent. Tick the appropriate box.

- A.** Cancel **all** consents.
- B.** Cancel the consents given for the individual, group or business identified below:

Name of individual:	RepID
_____	_____
Name of group:	GroupID
_____	G _____
Name of business:	Business Number
_____	_____

Note

If you want another representative to act on your behalf for income tax matters for the account specified in **Part 1**, complete **Part 2**, and **Part 3**. If not, go to **Part 5**.

Part 5 - Signature

You or your legal representative (e.g., person with your power of attorney, a guardian, or an executor or administrator of your estate) must sign and date this form. If you are signing and dating this form as the legal representative, send us a copy of the legal document that identifies you as the legal representative, if you have not already done so.

By signing and dating this form, you authorize us to deal with the individual, group, or business identified in **Part 2** and/or to cancel the consents shown in **Part 4**.

We will not process this form unless it is **signed and dated** by you or your legal representative.

This form must be received by the CRA within six months of its signature date. If not, it will not be processed.

_____	_____
Print name	Year Month Day
_____	_____
<input checked="" type="checkbox"/> Taxpayer or legal representative signature	Date of signature