

Tax practitioner assistance form

Use this form to request assistance in resolving administrative matters relating to your client or practice.

- This form will only be actioned if lodged through Online Services for Agents, and must be submitted as a PDF.
- All fields with an asterisk (*) are mandatory

5	ection A: Contact details (contact person for this request)
1	Name* Title: Mr Mrs Miss Ms Other Family name
	First given name Other given names
2	Practice name*
3	Preferred phone number and email address*
	Phone number
	Email address
	Email address
4	Registered agent number (RAN) or Australian Business Number (ABN)*
7	RAN
	ABN
Se	ection B: Client details (individual or entity the transaction relates to)
5	Name*
	Title: Mr Mrs Miss Ms Other
	Family name
	First given name Other given names
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6	Business name of client*
7	Tax file number (TFN) or Australian business number (ABN)*
	ABN STATE OF THE S

Describe the m	atter, facts an	nd/or question	s that vou are s		ILION	
Provide client iden		id/or question	s that you are s	ceking for resolu	ition	
escribe the in	teractions you	ı have had with	n the ATO about	this matter inclu	ding research o	n ato.gov
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Section C: Matter requiring Tax practitioner assistance

0	All fields on this form are mandatory. Your application will be rejected if parts are incomplete.					
	Acknowledgment of acceptance					
	I agree Date					
0	Please provide full and true disclosure of all relevant information. This will help speed up the resolution process.					
•	The ATO service standard is 28 days for written advice if all necessary information is provided.					
	Submit this form to the ATO by following the step-by-step instructions found at ato gov au/TPA					