Form **13803** (Rev. January 2013)

Department of the Treasury-Internal Revenue Service

Application to Participate in the Income Verification Express Service (IVES) Program

(Please read the instructions carefully before completing this Form)

For Official Use Only Control Number:

OMB Number 1545-2032

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Please check the type of ap			•			_	<u>'</u>	_	
New Renewal		Amended	Add N	ew Location		Cancell	ation [Address	s Change
 Please check the box that describes your organization status: 				Reason(s) for using the IVES Program: (Select all that apply)					
☐ Government Agency ☐ Partnership				☐ Mortgage Services ☐ Banking Service				•	
☐ Sole Proprietorship ☐ Corporation				☐ Background Check ☐ Licensing Requireme			rement		
LLC Other (Spec	ify)			☐ Credit Check ☐ Other (Specify)					
2. Legal name of business (Required)								Taxpayer Identification (TIN) (Required)	
4. Doing Business As (DBA) business name listed on I		(Complete only	if the bu	usiness is op	perating (under a	name whi	ch is differe	nt than the
5. Business Location Address	ss* (Re	quired)							
Street Address			City	Dity			State	ZIP C	ode
* If more than one location, attach	a separat	e sheet listing all loca	ations.				l		
6. Business Telephone Num	ber (Re	equired)		Fax Number (Required)					
Business E-mail Address									
7. Billing Address required it	differe	nt from the location	on addr	ess on Line	5.				
Street Address			City	City			State	ZIP C	ode
8. Complete the following in	formation	on for the principa	al comp	any official,	partner o	or owne	r of busine	ess.	
Company official name (first, middle initial, last)				Title			cial Security Number (Required)		
Home Street Address				Telephone Number Date			te of Birth (mm/dd/yyyy) (Required)		
City	State	ZIP Code	E-m	E-mail Address					
* If more than one principal compa	ny officia	, partner or owner of	business	, attach a sepa	rate sheet	listing all	principals.		
9. Primary Contact Name (ranswer IRS questions du	•					t be ava	ailable on a	a day to day	basis to
Last Name				First Name				MI	
Telephone Number (Required)				mail Address (Required)					
10a. Have you been convicted of a felony in the last 10 Yes No (Please attach an explanation for				a "Yes" response.) usage ir		sage info	Verification Express Service formation:		
10b. Are you current with your individual and business taxes, including any corporation and employment tax obligations?					Es	stimated	annual vo	olume of IVE	ES requests:
Yes No (Please attach an explanation for a "No" response.)									

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Continuation Sheet for Application to Participate in the Income Verification Express Service (IVES) Program

OMB Number:

12. Complete the following information for the responsible official. The responsible official is an individual with responsibility for the operation and IVES users at the business location listed above. A principle listed above may also be a responsible official.

Responsible official name (first, mic	ddle initial, last)	Title	Social Security Number (Required)		
Home Street Address			Telephone Number	Date of Birth (mm/dd/yyyy) (Required)		
City	State	ZIP Code	E-mail Address			
13 Ry marking this ho	v volla	aree to review Publ	ication 4557 Safeguarding	Taynayer Data and shide by the		

13.
By marking this box, you agree to review Publication 4557, Safeguarding Taxpayer Data and abide by the guidelines of the publication. *In addition, you can only use taxpayer information that you receive via a Form 4506-T or Form 4506T-EZ request for the purpose(s) the taxpayer/requestor intended.* Failing to complete this section will result in the application being rejected and returned.

Where to fax your application: Please fax your application to IVES Coordinator Fax Number (TBD). The IRS conducts a suitability check on the applicant, and on all Principals and Responsible Officials listed on the application to determine the applicant's suitability to be an IVES participant. After an applicant passes the suitability check and the IRS completes processing the application, the IRS notifies the applicant of acceptance to participate in the program.

A Responsible Company Official must sign the application agreement indicating understanding of the Privacy Act restrictions relating to the use of this service.

Privacy Act Notice: Our right to ask for information is 5 U.S.C. 301 and the Internal Revenue Code Section 6109 and applicable regulations. The registration information we are requesting is used to create an account for you, authenticate your identity and for billing purposes. We may disclose the information to the Department of Justice, to enforce the tax laws, civil and criminal, to cities, states, the District of Columbia and U.S. commonwealths or possessions to carry out their tax laws. We may give it to other countries under a tax treaty, to federal and state agencies to enforce federal non-tax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. Your participation in the Income Verification Express Services (IVES) program is voluntary, however, if you do not provide all or part of the information required to create your account, you will not be eligible for access to IVES.

Under the penalties of Perjury, I declare that I have examined this application and read all accompanying information, and to the best of my knowledge and belief, the information being provided is true, correct, and complete. In addition, I have read the Internal Revenue Service rules and procedures for participating in the Income Verification Express Service program and I agree to abide by them and to pay resulting fees timely. I understand that failure to do so will result in a temporary or permanent exclusion from the program.

Name and title of Principal, Partner or Owner (type or print)	Signature of Principal, Partner or Owner	Date

Acceptance for participation is not transferable. I understand that if this business is sold or its organizational structure changes, a new application must be filed. I further understand that noncompliance will result in the business and/or the individuals listed on this application, being suspended from participation in the IVES Program.