Canada Revenue Agency / Agence du revenu du Canada

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) who would act as your representative for income tax matters or to cancel any existing representatives on your file. Send your completed form to your CRA tax centre. You can find the address of your tax centre on the attached information sheet. To **immediately cancel** a consent, call us at **1-800-959-8281**. 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, call us at 1-800-959-8281 before submitting this form to ensure we have your current mailing address. If you have registered with the **My Account** service, you can change your address by going to **www.cra.gc.ca/myaccount**.

To **authorize** a representative, complete Part 1, Part 2 **or** Part 3, Part 4, and Part 6.

To **cancel** a representative, complete Part 1, Part 5, and Part 6.

Part 1 – Taxpayer information

Complete this part to identify yourself and to give your account number.
You will need to complete a **separate Form T1013** for each account.

First name	Last name	Work telephone number	Home telephone number
		– –	– –

Complete the one that applies:

Individual	Trust	T5
Social insurance number	Trust account number	T5 filer identification number
	T	H A

To authorize your representative for online access, complete Part 2; otherwise, complete Part 3.

Part 2 – Giving consent for a representative (including online access)

You must complete a separate Form T1013 for each representative. Note that online access is not available for trust accounts. Please fill out Part 3 of the form to give your consent to a representative for your trust account.

To grant online access to your representative, enter his or her identification number.

For an individual

RepID

or

For a group

GroupID

G

or

For a business

Business Number (BN)

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

Enter the full name of the individual, group or business.

Name of individual associated to the RepID

First name: | Last name:

Name of the group associated to the GroupID

Name of the business associated to the BN

Enter the **level of authorization** (level 1 or 2):

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

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

Part 3 – Giving consent for a representative (other than online access)

You must complete a separate Form T1013 for each representative.

- If you are giving consent for an **individual**, enter the individual's full name in the appropriate box below.
- If you are giving consent for a **business**, enter the name of the business in the appropriate box below.

Name of individual	Name of business		
First name:			
Last name:	Telephone: – –	Ext:	Fax: – –

Part 3 continued on the next page ➔

(Vous pouvez obtenir ce formulaire en français à **www.arc.gc.ca** ou au **1-800-959-3376**.)

Canada

Part 3 (Continued)

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.

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): ____

☐ **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										

If this consent is for a **trust account** and the year-end is not December 31, enter the month and day of the year-end. Month Day

Part 4 – Consent expiry date

Enter an expiry date for the consent given in **Part 2** or **Part 3** 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

Part 5 – 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

First name: Last name:

Name of business

RepID **or** GroupID G **or** Business Number

Part 6 – Signature

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

☐ I have power of attorney for this taxpayer, I am the legal guardian of this taxpayer, or I am the executor/administrator of this taxpayer's estate.

By signing and dating this form, you authorize us to deal with the individual, group, or business identified in **Part 2** or **Part 3** and/or to cancel the consents shown in **Part 5**.

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 of taxpayer or legal representative

X

Taxpayer or legal representative signature

Year Month Day

Date of signature