TAX WAIVER FORM

This form is a Waiver Form for the Release of District Tax Information from the Office of Tax & Revenue, Office of the District of Columbia Chief Financial Officer.

Business Name					
Trade Name if Different from Business Name					
Federal Employee Identification Number					
Property Address				Square	Lot
City		State	Zip		
Mailing Address if Different from Property Address					
, and a state of the state of t					
City		State	Zip		
I hereby give the District of Columbia Office consent to release tax i Community Foundation for the National Cainformation released under this consent is limite laws and regulations as of January 1, 2016 .	information, to incapital Region ("	clude real prope Community Fou	rty tax ındatio	information if n").	applicable, to the derstand that the
If is not in compliance, whether or not is maintaining the purpose of determining whether or not of Columbia and for verifying actual tax returns. I further pursuant to this release will be placed in my file dissemination to any individual outside of the Columbia.	ng a payment agr business a ther understand that is maintain	eement. I unders is in compliance ddress; but doe that the informated by the Comm	stand the with the s not in ation the	nat this inform ne revenue la nclude disclo nat is receiv	nation is merely follows of the Distric sure of ed from the OT
I hereby authorize the Office of the Chief F research my taxes for the past three years – ta			and Re	evenue, acce	ss to review an
Signature of Authorized Representative		Date			
Print Name of Authorized Representative		Title			

c/o The Community Foundation for the National Capital Region 1201 15th Street NW, Suite 420 Washington, DC 20005 202.955.5890 Main 202.955.8084 Fax