CLIENT AGREEMENT FOR TAX REPRESENTATION AND AUDIT SUPPORT

This Agreement is entered into on this _____ day of _____, 20_____, by and between:

Tax Representative:
Firm Name: _____
Representative Name: _____
Address:

_____

Phone: _____ Email: _____

Client:
Name / Entity: _____
Taxpayer Identification Number (last 4 digits): _____
Address:

_____

Phone: _____ Email: _____

1. SCOPE OF SERVICES

The Client hereby retains the Tax Representative to provide professional tax representation and audit defense services before the following tax authority: _____. This representation is limited strictly to the following tax types and tax periods:

- Tax Type(s): _____
- Tax Period(s) / Year(s): _____
- Specific Notice / Audit Reference Number (if applicable): _____

Services shall include, but are not limited to, review of relevant financial records, preparation of responses to tax authority inquiries, attendance at audit conferences, and negotiation of potential administrative settlements within the scope of the specified tax periods.

2. CLIENT RESPONSIBILITIES

The Client agrees to fully cooperate with the Tax Representative and to provide all requested financial records, tax returns, receipts, and other relevant documentation in a timely and organized manner. The Client represents that all information provided is accurate and complete to the best of their knowledge. The Tax Representative will not audit or verify the information provided by the Client for accuracy or completeness.

3. FEES AND PAYMENT TERMS

The Client agrees to compensate the Tax Representative for services rendered under the following terms:

Initial Retainer Fee: $_____ (Due upon execution of this Agreement, non-refundable to the extent earned).

Billing Rate structure (select one):

[ ] Hourly Rate: $_____ per hour, billed in increments of _____ hours.
[ ] Flat Fee: $_____ for the entire specified scope of services.
[ ] Other Fee Arrangement:

_____

Invoices are due and payable within _____ days of receipt. Interest at a rate of _____% per month may be charged on past due balances.

4. POWER OF ATTORNEY

To perform the services outlined, the Client agrees to execute a Power of Attorney form (such as IRS Form 2848 or equivalent state form)

authorizing the Tax Representative to represent the Client before the specified tax authorities.

5. LIMITATION OF LIABILITY AND GUARANTEES

The Client acknowledges that the Tax Representative makes no guarantees, representations, or warranties regarding the outcome of any tax audit, appeal, or negotiation. The final determination of tax liability is solely within the authority of the respective tax agencies.

6. TERMINATION

Either party may terminate this Agreement at any time by providing written notice to the other party. Upon termination, the Client shall pay the Tax Representative for all services performed and expenses incurred up to the date of termination.

7. GOVERNING LAW

This Agreement shall be governed by, and construed in accordance with, the laws of the State of _____.

IN WITNESS WHEREOF, the parties hereto have executed this Client Agreement for Tax Representation and Audit Support as of the date first written above.

TAX REPRESENTATIVE:	**CLIENT:**
_____	_____
Signature	Signature
_____	_____
Printed Name	Printed Name
_____	_____
Date	Date