



# Authorization for Electronic Delivery of Levy Documents

## Return completed form

Mail: Financial Record Matching & Levy Unit  
 Wisconsin Department of Revenue  
 PO Box 8901  
 Madison, WI 53708-8901

Fax: 608-223-6541

Email: DORFinancialRecordMatching@wisconsin.gov

## Request Type

(check one)  New Authorization  Update Information  Cancel Electronic Delivery

**Wisconsin Department of Revenue requires at least one user have eLevy access before electronic delivery can be initiated. If no user has eLevy access, please include a completed "User Access to Business eLevy Account" form.**

## Business Information

Name of Business*			
Levy Delivery Mailing Address			FEIN or WTN *
City	State	Zip	Levy Processing Fax Number
Primary Levy Contact Name	Email		Phone
Additional Levy Contact Name	Email		Phone
Additional Levy Contact Name	Email		Phone

\* Required Field

## Email address to send all automated notifications of new documents

Email address *
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All automated notifications will go to this email address.

**The above named business is requesting and agreeing to electronic delivery of all levy documents from the Wisconsin Department of Revenue and understands no physical documents will be delivered once this request is processed. The above named business acknowledges this request and agreement does not waive the responsibilities of the business under section 71.91(6), Wis. Stats., in any way.**

***I certify that I am an officer or employee of the above named business with proper authority to execute this request and agreement.***

Signature *	Title *	Date *
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