



# User Access to Business eLevy Account

## 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)  Grant new access  Revoke access  Send list of all users with eLevy access

**Wisconsin Department of Revenue requires all new eLevy users to setup a logon ID and password before eLevy access will be granted. Before submitting this form, have new eLevy users go to <https://tap.revenue.wi.gov/mta/> and click on "New user? Register now."**

## 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

## Name of user(s) to grant/revoke access

Print Name
Print Name
Print Name

The above named business is also 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.

*Email address to send ALL automated notifications of new documents*

Email
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***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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