Form **872-B** (Rev. January 2001)

Department of the Treasury - Internal Revenue Service

## Consent to Extend the Time to Assess Miscellaneous Excise Taxes

In reply refer to:

Taxpayer Identification Number

			, taxpayer(
		(Name(s))	
of	(Alumbar Stra	et, City or Town, State, ZIP Code)	and th
	(Number, Stre	et, City of Town, State, 21F Code)	
Commissioner	of Internal Revenue consent and a	gree to the following:	
(1) The amount of liability for(Kind)			tax, imposed on the taxpayer(s) b
		(Kina)	
ection	of the	due for the period _	
	(Internal Revenue Code, R	Revenue Act, etc.)	
	may be assessed	at any time on or before	
			(Expiration date)
2) The collect	ion provisions and limitations now in	effect will also apply to any tax	assessed within the extended period.
3) The taxpay nis agreemen		fund and the Service may credit	or refund the tax within 6 months afte
MA		IEY WOULD OTHERWISE B	E ENTITLED.
YOUR SIGNATU	JRE HERE —		(Date signed)
TAXPAYER'S R	EPRESENTATIVE		
SIGN HERE	<b>-</b>		(Date signed)
CORPORATE NAME	_		
NAME			
CORPORATE OFFICER(S)		(Title)	(Date signed)
SIGN HERE		(Title)	(Date signed)
INTERNAL REV	ENUE SERVICE SIGNATURE AND TITLE		
(Di	vision Executive Name - see instructions)	(Division E	Executive Title - see instructions)
вү	(Authorized Official Official	and Title and instruction	/Data = ==== 1)
	(Authorized Official Signature	and ride - see mstructions)	(Date signed)

## Instructions

If this consent is for a partnership return, only one authorized partner need sign.

If you are an attorney or agent of the taxpayer(s), you may sign this consent provided the action is specifically authorized by a power of attorney. If the power of attorney was not previously filed, you must include it with this form.

If you are acting as a fiduciary (such as executor, administrator, trustee, etc.) and you sign this consent, attach Form 56, Notice Concerning Fiduciary Relationship, unless it was previously filed.

If the taxpayer is a corporation, sign this consent with the corporate name followed by the signature and title of the officer(s) authorized to sign.

## **Instructions for Internal Revenue Service Employees**

Complete the Division Executive's name and title depending upon your division.

If you are in the Small Business /Self-Employed Division, enter the name and title for the appropriate division executive for your business unit (e.g., Area Director for your area; Director, Compliance Policy; Director, Compliance Services).

If you are in the Wage and Investment Division, enter the name and title for the appropriate division executive for your business unit (e.g., Area Director for your area; Director, Field Compliance Services).

If you are in the Large and Mid-Size Business Division, enter the name and title of the Director, Field Operations for your industry.

If you are in the Tax Exempt and Government Entities Division, enter the name and title for the appropriate division executive for your business unit (e.g., Director, Exempt Organizations; Director, Employee Plans; Director, Federal, State and Local Governments; Director, Indian Tribal Governments; Director, Tax Exempt Bonds).

If you are in Appeals, enter the name and title of the appropriate Director, Appeals Operating Unit.

The signature and title line will be signed and dated by the appropriate authorized official within your division.