

#### BEFORE THE IOWA DEPARTMENT OF REVENUE HOOVER STATE OFFICE BUILDING DES MOINES, IOWA

IN	THE	MAT	TER	OF:
				<b>•</b> •••

Name(s):

Docket No.

(filled in by Department)

PETITION FOR RULE WAIVER

### If needed, you may attach additional pages to this form.

1. Waiver requested. Provide a description of the waiver requested, including the precise scope and operative period for which you want the waiver to apply. Include a description and citation of the rule or rule provisions from which a waiver is being requested.

Relevant rule or rule provision:

Relevant facts:

2. Prior contacts with the Department. Provide a complete history of any prior contacts between you and the Department relating to the activity affected by the proposed waiver, including audits, notices of assessment, refund claims, appeals, contested case hearings, or investigative reports within the last five years. Attach any described documents to this form.

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3. Similar cases. Provide any information you have about the Department's treatment of similar cases.

Interested parties. Provide conta	act information for the following people:	
Any public agency or political	subdivision which might be affected by t	he granting of a waiver:
Name:		
	State:	Zip:
Phone:		
Address:		
Address:		
Address: City:		
Address: City: Phone: Any person with knowledge of release of information forms th	State:	Zip: sed waiver. Provide any sig
Address: City: Phone: Any person with knowledge of release of information forms th facts to furnish the Departmen	State: f the relevant facts relating to the propo at may be necessary to authorize any pe	Zip: sed waiver. Provide any sig rson with knowledge of rele
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Address: City: Phone: Any person with knowledge of release of information forms th facts to furnish the Departmen Name: Address:	f the relevant facts relating to the proposition of the proposition relating to the waiver:	Zip: sed waiver. Provide any sig rson with knowledge of rele

**5. Meeting.** Would you like to request an informal meeting with the Department about the rulemaking request? The Department has the discretion to decline a meeting request.

 $\Box$  Yes  $\Box$  No

6. Signature. If you are completing this form as an authorized representative for the Petitioner, you must include a copy of an executed IA 2848 Power of Attorney form or Representative Certification Form (14-108) as applicable unless you already have one on file with the Department.

I, the undersigned, declare under penalties of perjury or false certificate, that I have examined this document, and, to the best of my knowledge and belief, it is true, correct, and complete. I declare that I am authorized to act on behalf of the Petitioner, and will act only within my authority.

Signature (Petitioner or Authorized Representative of Petitioner):

Date:		
Email:		
Petitioner's address:		
City:		Zip:
Authorized Representative's address:		
City:	State:	Zip:
To whom should communications be directed:		
Case number or state identification number:		

**Waiver petitions are subject to open records laws.** Your petition and any documents attached to your petition may be made available for public inspection subject to lowa's open records laws. To learn more about what information the Department will automatically redact prior to public disclosure, and how you may request that the Department redact certain other information, please visit revenue.iowa.gov/TBOR.

# A waiver petition can be submitted to request that a discretionary rule or provision of a discretionary rule not be applied.

Only discretionary rules may be waived. Discretionary rules are those that result from a delegation by the legislature to the Department to create a binding rule to govern a given issue or area. Discretionary rules do not interpret any statutory provision of the law promulgated by the legislature. An interpretive rule cannot be waived.

The director may only issue a waiver if: (1) the legislature has delegated authority to justify the action, and (2) the waiver is consistent with statutes and other provisions of law. No waiver from any mandatory requirement imposed by statute may be granted.

In addition to the requirements above, a successful rule waiver petition must meet the following criteria: (1) the waiver would not prejudice the substantial legal rights of any person; (2) the rule or provisions of the rule are not specifically mandated by statute or another provision of law; (3) the application of the rule provision would result in an undue hardship or injustice to the petitioner; and (4) substantially equal protection of public health, safety, and welfare will be afforded by means other than that prescribed in the rule or rule provision for which the waiver is requested.

Granted waivers are temporary unless sufficient evidence is provided that a temporary waiver would be impracticable. There is no automatic renewal of waivers. For more information about petitions for rule waivers, consult Iowa Administrative Code rule 701—3.7.

**Section 1:** Provide a description of the specific waiver being requested. Include the relevant facts that you believe justify the waiver and a citation to the relevant rule. An order granting a rule waiver will be effective for twelve months unless otherwise provided by the director.

**Section 4:** Identify any other individuals or class of individuals affected by or interested in the waiver. The Department will not issue a waiver petition that will prejudice the substantial legal rights of another person.

## **Petition for Rule Waiver Instructions**

Section 6: You may represent yourself in this matter. You may authorize a third party to act on your behalf by using the IA 2848 lowa Power of Attorney Form. Some individuals have authority to act on behalf of a taxpayer outside of being granted that authority on an IA 2848 lowa Power of Attorney Form (e.g. authority as a guardian, conservator, or executor). Those individuals must certify their authority using the Representative Certification Form (14-108). If the taxpayer is a corporation, association, partnership or other entity and an officer or employee of the taxpayer is seeking to act as the taxpayer's representative, the officer or employee must establish their authority to act on behalf of the taxpayer using the Representative Certification Form (14-108). You must include the applicable form unless you already have one on file with the Department.

## Submit your waiver petition:

Online: govconnect.iowa.gov

By email: IDRHearings@iowa.gov

By mail:

ATTN: Legal Services and Appeals lowa Department of Revenue PO Box 14457 Des Moines, IA 50306-3457

In person during regular business hours: Iowa Department of Revenue 1st Floor Hoover Building 1305 E Walnut Des Moines, IA 50319

See revenue.iowa.gov/law-policy/tax-guidance for more options for submitting your petition.