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

Name(s):			PETITION FOR RULEMAKING	
		Docket No.	(filled in by Department)	
	If needed, you may attacl	h additional page	es to this form.	
Tax type at issue. Chec ☐ Individual income	• • •	☐ Property	☐ Franchise	
☐ Corporate income	☐ Partnerships/S-Corp	☐ Withholding	☐ Inheritance	
☐ Tax credits	☐ Fiduciary	☐ Other (Speci	fy):	
the text or a summary of or repeal a rule, cite the ror repealed.	f the contents of the propose relevant language of the parti	ed rule or amendm cular portion or po	nent to a rule. If this is a petition to amend ortions of the rule proposed to be amended	
Authority. Cite any law of that action.	relevant to the Department's	s authority to take	the requested action or to the desirability	
	Address: City: State: Tax type at issue. Chect Individual income Corporate income Tax credits Statement of rulemaking the text or a summary of or repeal a rule, cite the mor repealed. Authority. Cite any law	Tax type at issue. Check all that apply: Individual income	Address:	

Data. Provide a brief summary of any da	ata supporting the recommended actic	n.
Prior contacts with the Department. Department relating to the activity affects refund claims, appeals, contested case five years. Attach any described documents.	ed by the proposed rulemaking, includi hearings, or investigative reports rela	ng audits, notices of assessm
Other interested parties. Provide the r	names and addresses of other person	s. or a description of any cla
persons, known by you to be affected by		
persons, known by you to be affected by Name:		
Name:		
Name:		Zip:
Name: Address: City:	State:	Zip:
Name: Address: City: Name:	State:	Zip:
Name: Address: City: Name: Address:	State:	
Name: Address: City: Name: Address: City:	State: State:	
Name:	State: State:	
Name:	State: State:	Zip:
Name: Address: City: Name: Address: City:	State: State:	Zip:

9.	Additional information. Provide any additional information relevant to this petition.					
10.						
	Signature. If you are completing this form as an authorized representative for the taxpayer, you must include a copy of an executed IA 2848 Power of Attorney form or Representative Certification Form, 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.					
	Signature (Petitioner or Authorized Representative of Petitioner):					
	Date:					
	Email:	Phone:				
	Petitioner's address:					
	City:	State:	Zip:			
	Authorized Representative's address:					
	City	State:	7in:			

Rulemaking 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 tax.iowa.gov/TBOR.

The Department may deny a petition if all the required information has not been provided. Denial of a petition because the petition does not substantially conform to the required form does not preclude the filing of a new petition on the same subject when the new petition contains the required information that was the basis for the original denial.

Within 60 days after the filing of the petition, or within an extended period as agreed to by the petitioner, the Department must, in writing, either: (a) deny the petition and notify the petitioner of the Department's action and the specific grounds for the denial; or (b) grant the petition and notify the petitioner that the Department has instituted rulemaking proceedings on the subject of the petition. The petitioner shall be deemed notified of the denial of the petition or the granting of the petition on the date that the Department mails or delivers the required notification to the petitioner.

For more information, see Iowa Administrative Code rule 701—7.29.

Submitting your petition for rulemaking:

Submit by email:

IDRHearings@iowa.gov

Submit by mail:

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

Iowa Department of Revenue 1st Floor Hoover Building 1305 E Walnut Des Moines, IA 50319

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