

Power of attorney (employer and employee)

Herewith the undersigned provide full power of attorney to Expatax BV to act as representative for the application or extension of the 30% ruling and to perform any correspondence and/or contacts with, file objections with and to take matters up with the tax authorities.

This power of attorney remains valid until the proxy has given written notice that the power of attorney will be ended.

Name employer:

Wage tax number:

Name undersigned:

Date:

Signature employer:

Name employee:

BSN:

Date:

Signature employee: