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# AUTHORIZATION TO DISCLOSE INFORMATION, DESIGNATION OF ADDRESS OF RECORD AND REVOCATION

UNEMPLOYMENT INSURANCE  
SFN 59128 (R. 04-2026)

Job Service North Dakota  
UI/Tax & Field Services  
PO Box 5507  
Bismarck ND 58506-5507  
701-328-2814  
Fax 701-328-1882  
TTY Relay ND 800-366-6888

## Employer Information

Name of Employer	Telephone Number		FEIN
Name of Spouse, Fiduciary, or Personal Representative (if applicable)	Telephone Number		FEIN (if different than that of employer)
Address	City	State	Zip Code

## Designated Individual or Firm

Name of Individual or Firm	Telephone Number		FEIN
Address	City	State	Zip Code
Fax Number	Email – Address		

### A. Authorization to Disclose Information

Job Service North Dakota is authorized to disclose confidential information relating to unemployment insurance (UI) matters selected below to the designated individual or firm above.

- UI Tax
- UI Claims
- All

This authorization takes effect upon receipt by Job Service North Dakota and remains in effect until revoked in writing by the employer. The authorization does not cover the routine mailing of tax forms, refund checks, original notices (e.g. Notice of Determination, Notice of Claim, etc.), or other original written communications.

### B. Revocation

Job Service North Dakota is notified that the above-named employer hereby revokes the authorization to disclose confidential information relating to selected unemployment insurance (UI) matters to the previously authorized individual or firm. No new authorization is being made. (If this box is checked, **Do Not** Check Box A.) This revocation takes effect immediately upon receipt by Job Service North Dakota.

### C. Designation of Address of Record

Job Service North Dakota is notified that the above-named individual or firm is designated to be the address of record (place to which correspondence is sent) with respect to unemployment insurance (UI) matters selected below.

- UI Tax Correspondence
- UI Claims Correspondence
- All Correspondence

This designation takes effect upon receipt by Job Service North Dakota and remains in effect until revoked in writing by the employer.

### D. Revocation

Job Service North Dakota is notified that the employer hereby revokes the designation of address of record to the above-named individual or firm, relating to unemployment insurance matters originally indicated. No new designation is being made. (If this box is checked, **Do Not** Check Box C.) This revocation takes effect immediately upon receipt by Job Service North Dakota.

## Signature of Employer

If signed by a corporate officer, partner, governor, manager, or fiduciary on behalf of taxpayer, I certify I have authority to sign this form on behalf of the employer.

Signature of Employer	Date
Printed Name	Title

## For Office Use Only

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