



STATE OF SOUTH CAROLINA
DEPARTMENT OF REVENUE
**GOVERNMENTAL ENTITY COLLECTIONS
NOTICE OF AUTHORIZATION**

GEC-4
(Rev. 4/19/24)
9098

To participate in the SCDOR's Setoff Debt and GEAR programs, claimant agencies must email this form to **SetoffDebt@dor.sc.gov** to register claimant agency coordinators as authorized contacts with the SCDOR. If you need to appoint more than 3 coordinators, complete additional GEC-4 forms. Register new coordinators as soon as possible so that your organization does not miss important correspondence.

If a coordinator no longer works with the Setoff Debt or GEAR programs, email **SetoffDebt@dor.sc.gov** so we can remove their access.

CLAIMANT AGENCY INFORMATION

Name _____	Agency ID number _____
Check the applicable programs your organization participates in: <input type="checkbox"/> Setoff Debt <input type="checkbox"/> GEAR	

COORDINATOR REGISTRATION

Primary Setoff/GEAR Coordinator

Name _____	Phone _____	Email _____
Title _____	GoAnywhere access status: <input type="checkbox"/> Existing user <input type="checkbox"/> New user	
Coordinator signature _____		Date _____

Additional Setoff/GEAR Coordinator (if necessary)

Name _____	Phone _____	Email _____
Title _____	GoAnywhere access status: <input type="checkbox"/> Existing user <input type="checkbox"/> New user	
Coordinator signature _____		Date _____

Additional Setoff/GEAR Coordinator (if necessary)

Name _____	Phone _____	Email _____
Title _____	GoAnywhere access status: <input type="checkbox"/> Existing user <input type="checkbox"/> New user	
Coordinator signature _____		Date _____

By submitting this Notice of Authorization, the claimant agency:

- Appoints these individuals to make requests on behalf of this agency to the SCDOR.
- Acknowledges these individuals will serve as the SCDOR's point of contact for debtor issues.
- Understands that the SCDOR will deny sending information regarding debts placed in the Setoff Debt and GEAR programs to anyone not listed as an authorized contact.