

AGENT AUTHORIZATION FORM

I hereby authorize _____ to act as my agent in handling my property assessment affairs concerning the following properties:

Key Number

Street Address

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I, as the owner, also give my permission to the Assessor's Office to divulge, to my authorized agent, any information it may have on file concerning this property. I also understand that my agent has the authority and my permission to accept a subpoena concerning this property on my behalf and further I agree to furnish information in my possession that will assist in the review of the assessment appeals.

This authorization expires on _____, unless revoked, in writing, prior to that date.

Owner's Signature

Date of Authorization

Mailing Address

Phone Number