AGENT AUTHORIZATION

FOR ASSESSOR'S OFFICE USE ONLY.

The Assessment Appeals Board is a separate agency from that of the Office of the Assessor and a separate agent authorization is required for assessment appeals. Contact the Clerk of the Board at (XXX) XXX-XXXX.

AUTHORIZATION OF AGENT DESIGNATION OF CALIFORNIA ATTORNEY, STATE BAR NO.
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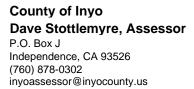
The below named person is hereby authorized to act on my/our behalf as agent in assessment matters for the property listed below and, if applicable, on the attached list, which are owned, possessed, controlled or managed by the undersigned.

AGENT NAME	COMPAN	IY NAME	C	Λ
MAILING ADDRESS (STREET ADD <mark>RE</mark> SS OR P. <mark>O.</mark> BOX,	77		EMAIL ADDRESS	
CITY	STATE ZIP CODE	DAYTIME TELEPHONE	ALTERNATE TELEPHONE	FAX TELEPHONE
REAL PROPERTY: ASSESSOR'S PARCEL NUMBER	P	ERSONAL PROPERTY: ACCOU	INT/ASSESSMENT NUMBER	R
A list consisting ofadditional additional and/or the account/assessment number			rcel Number for each pa	arcel of real property
AUTHORITY				
 This agent is delegated full authority to h materials that would be available to the t Other (please specify) 		atters with your office. Age	nt shall have access to a	all information and
DURATION OF AUTHORITY				
 This authorization is valid until (date): This authorization is valid for the calenda This authorization is valid for a period or unless revoked in writing or terminated b 	ar year 20 f no more than two (2)	only. years from the date of ex	cecution of this authoriz	ation as indicated below,
	CER	TIFICATION		
The undersigned certifies that they own, pos to designate an agent to act on behalf of designated agent and retains full respons acknowledges they may be required to furr agent.	all of the owners of sa bility for any and all a	aid property. The undersig actions this agent makes	ned acknowledges dele on behalf of the owne	gation of authority to the er. The undersigned also

SIGNATURE OF OWNER, PARTNER, OR OFFICER	TELEPHONE NUMBER
PRINT NAME	TITLE
EMAIL ADDRESS	DATE

PLEASE KEEP A COPY OF THIS FORM FOR YOUR RECORDS





AGENT AUTHORIZATION MULTIPLE PROPERTY LIST

Owner Name				
Agent Name				
For Real Property:	For Personal Property:			
Assessor's Parcel Number (APN):	Account/Assessment Number:			
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