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		COMPANY	NAME		
MAILING ADDRESS (STREET ADDRESS OR P. O. BOX)				EMAIL ADDRESS	
CITY	STATE ZIP CC	DDE	DAYTIME TELEPHONE	ALTERNATE TELEPHONE	FAX TELEPHONE
REAL PROPERTY: ASSESSOR'S PARCEL NUMBER		PEF	SONAL PROPERTY: ACCO	DUNT/ASSESSMENT NUMBER	2
A list consisting of additional p and/or the account/assessment number for				arcel Number for each pa	arcel of real property
AUTHORITY					
This agent is delegated full authority to hand materials that would be available to the und		ment mat	ters with your office. Ag	ent shall have access to a	all information and
Other (please specify)					
DURATION OF AUTHORITY					
This authorization is valid until (date):					
This authorization is valid for the calendar y	ear 20	C	only.		
This authorization is valid for a <u>period of ne</u> unless revoked in writing or terminated by o			ears from the date of e	execution of this authorization	ation as indicated below,
		CERTI	FICATION		
The undersigned certifies that they own, posses to designate an agent to act on behalf of all designated agent and retains full responsibili acknowledges they may be required to furnish agent.	ty for any ar	nd all ac	tions this agent makes	s on behalf of the owne	r. The undersigned also
SIGNATURE OF OWNER, PARTNER, OR OFFICER			TELEPHONE NU	IMBER	
PRINT NAME			TITLE		
EMAIL ADDRESS			DATE		
	_	-	IIS FORM FOR YO	UR RECORDS	



COUNTY OF ALAMEDA PHONG LA, ASSESSOR

1221 Oak St., Rm 145 Oakland, Ca. 94612-4288 (510) 272-3787 Fax (510) 272-3803 www.acgov.org/assessor



AGENT AUTHORIZATION MULTIPLE PROPERTY LIST

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