

# DECLARATION OF REPRESENTATIVE

Please Print or Type	Property Owner(s) Name(s) (As it appears on the Change of Value Notice)	Signature of Property Owner(s)	Date
	Mailing Address	(Print or type your name below if signing for a property owner who is not an individual)	
	City, State and Zip Code	Title, If applicable	

hereby appoints the following individual, organization, firm or partnership  _____ Individual Name _____ Firm Name _____ Mailing Address _____ City _____ State _____ Zip Code _____ _____ Telephone No. _____ _____	Circle the appropriate designation(s) 1. Attorney at Law. 2. Professional real estate tax representative. 3. Certified public accountant. 4. Member of the taxpayer's family. 5. Professional real estate appraiser. 6. Licensed real estate agent/broker. 7. A fiduciary for the taxpayer. 8. Other (explain) _____  Please Check One Box <input type="checkbox"/> Send notices and all other written communication in proceedings involving the parcels listed to the appointed representative.  <input type="checkbox"/> Send notices and all other written communications in the proceedings involving the parcels listed to the property owner.
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<input type="checkbox"/> All parcels listed in the name of the property owner. <input type="checkbox"/> Only parcels with the identification numbers listed.	_____ _____ _____ _____ _____ _____ _____
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