

EL DORADO COUNTY ASSESSOR

AGENCY AUTHORIZATION

I hereby appoint the agency / agent listed below to represent me in assessment matters with El Dorado County Assessor's Office. This authorization is for the purpose of:

- (Initial) As agent to sign Business Property Statements as provided under Section 441(e), of the California Revenue and Taxation Code.
(Initial) As agent delegated full authority to handle all matters relative to assessment both real and personal.

This authorization will remain in force and in effect until such time as the Assessor's Office acknowledges receipt by certified mail of a revocation in writing and will expire four (4) years from the date of execution of the authorization form.

Agent Information:

Agency / Agent Name:
Agent Mailing Address:
Agent Telephone Number: () Agent Email:

Owner Information:

Please list each Assessor's Parcel Number (APN) / Assessor's Business Assessment Number. Attach additional sheets if necessary with a reference to this authorization:

(APN/ Assessment Number) (APN/ Assessment Number)
(APN/ Assessment Number) (APN/ Assessment Number)

I certify (or declare) under penalty of perjury under the laws of the State of California that I have the authority to sign on behalf of the party or organization identified in the owner's information section above, and that this statement, including any accompanying documentation, is true and correct, and that it is complete to the best of my knowledge and belief. I also understand that the Assessor may require additional information be furnished on this request.

Assessee Name: Assessee Title:
Signature: Executed on:

Completed Agency Authorization forms should be mailed to: El Dorado County Assessor
360 Fair Lane
Placerville, CA 95667
Phone (530) 621-5716