## FOR TAX YEAR \_\_\_\_\_

## AGENCY AUTHORIZATION FORM

Pursuant to A.R.S. § 42-16001

- Persons who own, control, or possess property valued by the County Assessor may each year designate an agent to act on their behalf on any matter relating to the review of the valuation of the property before the Assessor or the County or State Board of Equalization.
- · This designation of an agent expires at the end of the calendar year.
- This form or a copy must accompany any petition, Taxpayer Notice of Claim, or response to a Notice of Proposed Correction filed with the Assessor or either Board of Equalization. The original form shall be provided for inspection by the agent on request of the County Assessor, either Board of Equalization, or the Department of Revenue.
- · Notices issued by the Assessor or either Board of Equalization relating to the review of the valuation of that property shall be sent to the agent of record.
- A petition for Review of Real Property or Personal Property, a Notice of Proposed Correction, or a Taxpayer Notice of Claim will not be accepted unless the Agency Authorization form accompanying the petition is signed by the person who owns, controls, or possesses the property.

FIRM NAME PHONE					UMBER
ENT NAME(S) AND	DEPARTMENT OF FINANCIAL INST	TITUTIONS REGISTRATION NUMBER	R(S)		
ONTINUED) AGENT	NAME(S) AND DEPARTMENT OF F	INANCIAL INSTITUTIONS REGISTRA	ATION NUMBER(S)		
ILING ADDRESS				CITY, STATE, ZIP CODE	
AIL ADDRESS(S)					
SNATION MADE	EBY: (Type or Print)				
MPANY NAME					
ME OF PERSON OV	WNING, CONTROLLING OR POSSE	SSING PROPERTY OR CONTACT P	ERSON	TITLE	
DRESS					
ITY, STATE, ZIP CODE			PHONE	NUMBER	EMAIL ADDRESS
IGNATURE OF PER	attached continuation form( SON CONTROLLING OR POSSESS FERENT THAN DESIGNATED ABO	SING PROPERTY	PRINT TITLE	RINT TITLE	DATE
COUNTY	PARCEL NUMBER	ACCOUNT NUMBER	COUNTY	PARCEL NUMBER	PERSONAL PROPERTY ACCOUNT NUMBER