AUTHORIZATION TO REPRESENT AN ENTITY, FIDUCIARY OR ATTORNEY-IN-FACT
IN AN APPLICATION FOR CORRECTION OF PROPERTY TAX ASSESSMENT

The individual or entity for which I am authorized to act owns the listed property or otherwise bears responsibility for payment of the taxes. I have signed this form on the date indicated to authorize the individual or firm named below to act as the taxpayer's *representative* in an application filed during the period **January 2, 2015 to March 2, 2015**. I authorize the Assessment Review Commission to communicate directly with the named representative in all matters relating to the application.

Name of taxpaying entity or individual

_____

Name, title and business address of person signing this authorization for the taxpayer

_____

My capacity is A □ Attorney-in-fact (POA) B □ Member or manager of a limited liability company taxpayer (LLC)
C □ General partner of taxpayer D □ Officer of a corporate taxpayer E □ Qualified fiduciary for taxpayer
F □ Officer of taxpayer's corporate* member or partner G □ Officer of condominium association

H □ Other: _____

* Name of corporation _____

Representative _____

Additional authorizations (if checked):

□ Administrative proceeding to review village or city assessment for 2015-16

□ Administrative proceeding to review village or city assessment for 2016-17

□ Judicial proceeding to review assessment under Article 7 of the Real Property Tax Law for 2015-16

□ Judicial proceeding to review assessment under Article 7 of the Real Property Tax Law for 2016-17

List all tax parcels for which authorization is given. □ Check here if lots are listed on an attachment.

Parcel number (section, block, lot, bldg, unit)	**house # and street or description**

Number of pages attached _____ **This authorization is valid only when dated and signed.**

➔_____ ➔_____

Signature for applicant-taxpayer **Date signed**

If I sign as an attorney-in-fact, I certify that my power of attorney remains in effect, I have attached a photocopy of the power, and listed the name and address of my grantor here: _____

File a dated and signed original of this form between January 2, 2015 and March 2, 2015.