Nassau County, New York • Assessment Review Commission
www.nassaucountyny.gov

AUTHORIZATION TO REPRESENT AN INDIVIDUAL TAXPAYER BY A REGISTERED REPRESENTATIVE

IN AN APPLICATION FOR CORRECTION OF PROPERTY TAX ASSESSMENT

This is the ONLY Acceptable format as stated in ARC RULES

The undersigned CERTIFIES that they are an aggrieved party within the meaning of the Real Property Tax Law and hereby authorizes the below representative to file with the Nassau County Assessment Review Commission

Tax Year _____ Representative Name _____ Rep # _____

Aggrieved party _____ Relationship to property _____
(i.e. Owner, Tenant, Contract Vendee)

By: Signature _____ Title (if applicable)_____
(must use for LLC, Inc.) (i.e. President, Member, Trustee)

Name (printed) _____ Date entered at time of signing _____

Parcel Id _____ Property address _____