



AGENT'S AUTHORIZATION FORM

APPLICANT'S/PROPERTY INFORMATION

APPLICANT'S NAME

APPLICANT'S STREET ADDRESS/P.O. Box

APPLICANT'S CITY/STATE/ZIP

SECURED: PARCEL/ASSESSMENT NO. _____
UNSECURED: PARCEL/ASSESSMENT NO. _____

AGENT'S AUTHORIZATION

2. AGENT'S AUTHORIZATION
If the applicant is a corporation, limited partnership, or limited liability company, the agent's authorization must be signed by an officer or authorized employee of the business entity.

(Name of Agent)

(Agent's Company Name, if applicable)

(Agent's Address)

(Agent's phone) (Alternate phone) (Fax phone)

The above named person/company is hereby authorized to act as my agent in this application and may inspect assessor's records, enter into stipulations, withdraw this application(s) and otherwise any settle issues relating to this application.

APPLICANT'S PRINTED NAME TITLE

APPLICANT'S SIGNATURE/DATE

AGENT'S CERTIFICATION

I hereby certify that a copy of the completed application for changed assessment has been forwarded to the applicant named in this application. If a copy of this form is being submitted, I will produce the original form with original signatures upon request or any action being requested will be denied.

(Name of Agent) (Agent's Company Name, if different)

(Signature of Agent/Date)

RETURN TO: Sutter County Clerk of the Board ❖ 1160 Civic Center Blvd., Suite A ❖ Yuba City, CA 95993