

**AGENT'S CERTIFICATION**

**DATE:** \_\_\_\_\_

**To Whom It May Concern:**

**I,** \_\_\_\_\_

**being the legal owner of property located at:**

\_\_\_\_\_

**hereby authorize:**

\_\_\_\_\_

**to act as my agent in all matters before the Board of Assessment Appeals of the Town/City of** \_\_\_\_\_

**for the assessment year commencing October 1<sup>st</sup>** \_\_\_\_\_

**Signed:**

\_\_\_\_\_