



COUNTY OF LAKE
CLERK OF THE BOARD OF SUPERVISORS
Courthouse – 255 North Forbes Street
Lakeport, CA 95453
Telephone (707) 263-2368
Fax (707) 263-2207

COUNTY OF LAKE
AGENT'S AUTHORIZATION FORM
(A copy to be filed with each Assessment Appeal Application)

OWNER/ PROPERTY INFORMATION

Property Owner's Name _____

Property Owner's Mailing Address _____

City/State/ZIP _____

Property Address _____

City/State/ZIP _____

Assessor's Parcel Number (APN) _____

AGENT'S INFORMATION

Agent's Name & Company _____

Agent's Mailing Address _____

City/State/ZIP _____

Phone Number: _____

Email: _____

AUTHORIZATION

The above named agent is hereby authorized to act as the agent for the property listed above and may sign and file applications, inspect Assessor's records, enter into stipulation, and otherwise settle issues relating to this property for the 2012/2013 tax year. Agent will provide client with a copy of the appeals application for the above Parcel Number(s). The above named agent also has full authority to handle all assessment matters with the Office of the Assessor and/or the Lake County Local Board of Equalization.

Property Owner's Signature _____

Property Owner's Printed Name _____

Company/Ownership (if applicable) _____

Title (if applicable) _____