**LETTER OF AGENT AUTHORIZATION**

This letter authorizes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (owner/designated agent), located at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (address) and (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_ (phone), to act in my/our behalf as agent in all matters pertaining to the ad valorem tax and/or assessment on real property located in El Paso County, Colorado, described below, and to review and all documents relating to the assessment and taxation of the property. Specifically, this property is described as:

El Paso County Schedule/Parcel #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Property Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Property Legal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner of Record: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This letter of agent authorization pertains to Tax Year(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ only.

This letter of agent authorization grants the authority to the agent named above to request and examine confidential records, discuss any appeal, and to agree to and sign a binding stipulation agreement with the Office of the El Paso County Assessor’s Office regarding the ad valorem property valuation on the above-described property.

If this letter of agent authorization is signed by an individual purporting to represent an organization (corporation, partnership, etc.) as the owner of record, documents exhibiting authority of that individual to sign on behalf of the organization must be attached and made part of this letter of agent authorization. The filing of the Letter of Agent Authorization automatically revokes all previous agent authorizations with the El Paso County Assessor’s Office for the years covered by this document and will remain in effect until the owner of record revokes it in writing.

Owner(s) Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name(s) Printed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_