6130 Elton Ave
Las Vegas, NV 89107
702 820 2799

AGENT AUTHORIZATION

PROPERTY OWNER _____

PROPERTY ADDRESS _____

COUNTY _____

APN (Assessor Parcel Number) _____

I agree that as to the property referred to above, Decline in Value, and its representatives, is hereby authorized to act as agent and representative for the undersigned, in all matters of property tax assessment, and all matters relating to the preparation and presentation of a property tax appeal(s) to the County Assessor, Tax Collector, Assessment Appeals Board, Board of Equalization or other agencies, for the 2019/2020 tax year.

The undersigned further authorizes Decline in Value, and its representatives, to execute and cause to be filed on behalf, and in the name of the undersigned, any and all documents relating to an appeal(s) of said assessments, for the 2019/2020 tax year. This is to include both “Informal Review” or “Informal Request”, and “Formal Appeal” or Application for Changed Assessment, for the 2019/2020 tax year.

The undersigned grants to Decline in value, and its representatives, the discretion to accept a lower assessed value for the property referred to above based on its professional judgment for the 2019/2020 tax year.

Decline in Value, and its representatives, is specifically authorized to examine and review all documents or information kept and maintained in all County and levying agencies.

The undersigned agrees to provide Decline in Value, and its representatives, with the documents and information requested for use in the performance of these services.

Decline in Value, and its representatives, will provide the undersigned applicant a copy of the application, and any other documents it sends or receives from all County and levying agencies.

APPLICANT:_____
Signature Print Name Title Phone Date

AGENT:_____Kurt Goff_____kurt@decline-in-value.com_____
Signature Print Name Email Date