

OFFICE OF ASSESSOR

C O U N T Y O F A L A M E D A 1221 Oak St., Room 145, County Administration Building Oakland, California 94612-4288 (510) 272-3836 / FAX (510) 891-5542

## PHONG LA ASSESSOR

## **AGENCY AUTHORIZATION**

This is to author	ze:
Agency Name:	Agent's Name:
Agent's Addres	:
Agent's Phone I	
To act	is our agent in assessment matters for the following property located in Alameda County:
Owner Name:	DBA:
Business Mailin (The mailing	g Address: address must be the company headquarters. Alameda County will not accept an authorized agent's address as an acceptable mailing address.)
Business Accou	nt Number(s):
	(Attach another sheet if necessary)
	(Attach another sheet if necessary)
The authority of	he agent is as follows: (please check applicable items)
office, exclu	s delegated full authority to handle all matters relative to assessment with your ding assessment appeals. (Please contact the Clerk of the Assessment Appeals 0-272-6352 for authorization for appeals.)
To sign Bus and Taxation	iness Property Statements as provided under section 441(e), California Revenue n Code.
This 'A	thorization' is to be effective as of January 1, 2020 through June 30, 2021.
all actions he/sh	elegated the above authority to this agent, we accept full responsibility for any and a makes on our behalf. We understand that we may be required to furnish nation upon request.
Signed by:	Date:
(	nly signature of owner or corporate officer of the business will be accepted)
Printed Name:	Title:
	ber: E-Mail:
	n aut of this forms is not completed, it may be considered invalid and

If any part of this form is not completed, it may be considered invalid and may be returned for completion.