



OFFICE OF ASSESSOR COUNTY OF ALAMEDA

1221 Oak St., Room 145, County Administration Building
Oakland, California 94612-4288
(510) 272-3836 / FAX (510) 891-5542
AssessorBPP@acgov.org

PHONG LA ASSESSOR AGENCY AUTHORIZATION

This is to authorize:

Agency Name: _____ Agent's Name: _____

Agent's Address: _____

Agent's Phone Number: _____ Agent's E-Mail: _____

To act as our agent in assessment matters for the following property located in Alameda County:

Owner Name: _____ DBA: _____

Business Mailing Address: _____

(The mailing address must be the company headquarters. Alameda County will not accept an authorized agent's address as an acceptable mailing address.)

Business Account Number(s): _____

Location(s): _____

(Attach another sheet if necessary)

The authority of the agent is as follows: (please check applicable items)

This agent is delegated full authority to handle all matters relative to assessment with your office, excluding assessment appeals. (Please contact the Clerk of the Assessment Appeals Board at 510-272-6352 for authorization for appeals.)

To sign Business Property Statements as provided under section 441(e), California Revenue and Taxation Code.

This 'Authorization' is to be effective as of July 1, 2023 through June 30, 2024

or until revoked

While we have delegated the above authority to this agent, we accept full responsibility for any and all actions he/she makes on our behalf. We understand that we may be required to furnish additional information upon request.

Signed by: _____ Date: _____

(Only signature of owner or corporate officer of the business will be accepted)

Printed Name: _____ Title: _____

Telephone Number: _____ E-Mail: _____

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