



**Agent Authorization Form**

**Assessed Person's Property Information – Section 299 & 300**

This authorization form must be completed when an agent/representative is acting on behalf of the assessed person. In addition, this form will allow a property manager to inform the Town that they represent an assessed person and appoint an agent on their behalf. These forms apply to the previous year's assessment pertaining to this year's taxation year. This authorization is only valid for the current tax year and is for assessment purposes only.

**Only one owner is allowed per authorization form.** Where there are multiple owners of the same property, only one owner needs to fill out this form. This form must be completed, signed, and filed with the Town of Daysland prior to the release of any information to the authorized party named in respect of the property described in this form. If you have any questions about the collection and use of this information, please contact the Town Office at 780-374-3767.

**SECTION A: Assessed Person Information**

Name of Assessed Person: *(Exact individual or corporation name as registered at Land Titles)*  
\_\_\_\_\_

Contact Name (If owner is a Corporation): \_\_\_\_\_

If Corporation, name and position of authorized signatory:  
\_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**SECTION B: Authorized Agent/Representative Information**

*I, \_\_\_\_\_ authorize disclosure of information to the Agent/Representative named below, to review the assessment of the property and/or to assist with an appeal of my assessment for the properties listed on page 2 of this document. I understand that this does not constitute a complaint to the Assessment Review Board under Section 460 of the Municipal Government Act.*

Agent/Representative Name: \_\_\_\_\_

Authorized Corporation Name (if applicable): \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Signature of Assessed Person or Authorized Signatory:** \_\_\_\_\_

**Printed Name of Signatory Person:** \_\_\_\_\_

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

**SECTION C: Schedule of Properties**

*The Schedule of Properties form is to be used in conjunction with the Agent/Representative Authorization form on page 1 on this document.*

*This form must be signed by the Assessed Person before the Town of Daysland will release information relating to these properties.*

<b>Assessment Roll Number</b>	<b>Property Address or Legal Description (Daysland, AB only)</b>	<i>Internal Use Only</i>

**Signature of Assessed Person:** \_\_\_\_\_

**Printed Name of Signatory Person:** \_\_\_\_\_

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

Please send the completed form and any other documentation to:

[info@daysland.ca](mailto:info@daysland.ca)

OR

By mail to:

Town of Daysland  
Attn: Tax Department  
Box 610  
Daysland, AB T0B 1A0

OR

In person at the Daysland Town Office at:

5130 50 Street  
Daysland, AB T0B 1A0

*If you have any questions regarding this form, please contact the Town Office at: 780-374-3767.*