## ORLEANS PARISH BOARD OF REVIEW ASSESSMENT APPEAL FORM BOR 1 LETTER OF AUTHORITY TO ACT IN REFERENCE TO ASSESSMENT ABATEMENT

(An Original, Notarized Form is required)

APPEAL NUMBER	
Owner Name	ParID
Owner Mailing Address	Taxbill Number
City,State,Zip	Taxon Number
I/WE hereby appoint and authorize(Ins	ert name of agent)
Agent Contact Info:	,
	Fov
Phone: Email:	Fax:
Agent Address (Street, City, State, Zip):	
To represent us as agent in filing an abatement necessary to complete the abatement appeal	
necessary to complete the abatement appear	process for the property located at.
(Insert Subject address—	Property Being Appealed)
(moon oubject address	Topolity Bolling Appeallous
(If abatements on more than one property are to be filed,	please attach list of property addresses to this form)
BY:	
(Please print or type name and title of taxpa	yer or person authorized to sign for taxpayer)
(Signature of taxpayer or person auth	orized to sign for taxpayer)
BEFORE ME, the undersigned notary public duly authoriz	zed in and for the Parish of
	,
State of personally	came and appeared
who stated executed for the purposes herein expressed.	d to me that this certificate of authority was properly
SWORN TO AND SUBSCRIBED thisda	ay of20
Moz	commission expires
NOTARY PUBLIC	TOTALISTICAL CAPITOO