

STEP 5. Agent Authorization. Complete this section only if an agent, including an attorney, has been appointed to represent the Taxpayer in proceedings before the Tax Commission. If you do not have an agent now, but wish to appoint one later, you must file with the Tax Commission a separate Agent Authorization form at the time you appoint the agent.

I hereby authorize the agent whose name and contact information appears below to appear before the Nevada Tax Commission to contest the value and/or exemption established for (Please check one):

- 1) All the properties owned by the Taxpayer in Nevada;
- 2) All the properties owned by the Taxpayer in _____ County, Nevada; or
- 3) Authorization is limited to the following properties:

APN or Parcel Identifier: _____

I further authorize the agent listed below to file petitions during the _____ calendar year; receive all notices and decision letters related thereto; and represent the Taxpayer in all related hearings and matters before the Nevada Tax Commission.

Authorized Agent Contact Information:

_____ Name of Authorized Agent (Please print or type)	_____ Contact Person (If different than Authorized Agent)
_____ Mailing Address	_____ Mailing Address (If different from Agent Address)
_____ City	_____ City
_____ State	_____ State
_____ Zip Code	_____ Zip Code
_____ Daytime Telephone Number (With area code) Fax Number (If avail.)	_____ Daytime Telephone Number (With area code) Fax Number (If avail.)
_____ E-mail address (If available)	_____ E-mail address (If available)

I hereby accept appointment as the authorized agent of the Taxpayer in proceedings before the Tax Commission.

_____ Authorized Agent Signature	_____ Title	_____ Date
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STEP 6. Sign and date the appeal.

I hereby petition the Nevada Tax Commission to hear my appeal. I have read the petition and believe the contents to be true. If Step 6 above is completed, my signature confirms appointment of the agent listed in Step 6.

_____ Petitioner Name (Please print or type)	_____ Title (Owner, officer, representative)
_____ Petitioner Signature	_____ Date
_____ *Authorized Agent Signature, if applicable	_____ Date

****If the petition is signed by an authorized agent only, ensure that a separate Agent Authorization Form with Petitioner signature has been completed. If the Petitioner is a corporation, limited partnership, or a limited liability company, the petitioner signature must be signed by an officer or authorized employee of the business entity.***

If you choose to submit additional documents, each document must be on 8-1/2" x 11" white paper and must be legibly written, printed or typewritten on one side of the paper only. Each document must be signed by the party, or authorized agent of the party, submitting it and must include the current mailing address and telephone number of the submitter.

If you have questions about this form or the appeal process, please call: (775) 684-2100 . Fax (775) 684-2020.