# Agent Representative Authorization Assessment Information Request



#### ASSESSMENT AND TAXATION

This form allows an owner, corporation, or property manager to appoint an agent to act on their behalf. This agent may be an individual, a corporation, an employee or a family member.

- This authorization is valid until December 31st of the tax year provided on page two, unless revoked in writing.
- Where there are multiple owners of the same property, only one owner needs to complete this form.

#### WHAT CAN MY REPRESENTATIVE DO?

Once this form has been validated by Sturgeon County, the authorized party can:

- Act on behalf of the registered property owner.
- Appoint an agent on their behalf.
- Speak to an assessor on behalf of the property owner, submit a request under section 299/300, request current year assessment detail reports or proformas during that calendar year.
- Agree to changes such as assessment value, exemption status, etc.

#### WHO CAN AUTHORIZE A REPRESENTATIVE?

Where the owner of the property is an individual (as named on the Land Titles certificate):

- The Authorization form is to be signed by the owner or someone with Power of Attorney and/or signing authority.
- If there are multiple owners of a property, only one owner's signature is required.

Where the owner of the property is a corporation (as named on the Land Titles certificate):

- · Individuals listed as owning 1% or more of the shares of the corporation owning the property.
- · Individuals that have corporate signing authority through a resolution of the corporation.
- Individuals signing for the corporation can include:

President Manager of ... in relation to property assessment

Chief Financial Officer (CFO) Chief Executive Officer (CEO)

Comptroller Asset Manager

Vice President Controller Director of ... in relation to property assessment

Where a Property Management Corporation appointing a representative can provide:

- The signed contract/agreement confirming that they have the authority to act on behalf of the owner (assessed person) of the property in relation to property assessment, or
- An Affidavit Form completed in full.

#### IMPORTANT NOTICE FOR PROPERTY OWNERS

An individual or company is permitted to act as a representative or authorized agent for the assessed person in interactions associated with the administration of certain aspects of the *Municipal Government Act*, Part 9. "Assessed person" means a person who is named on an assessment roll in accordance with section 304 of the *Municipal Government Act*.

Return completed forms by e-mail: <a href="mailto:assessment@sturgeoncounty.ca">assessment@sturgeoncounty.ca</a>
Or by mail: Assessment Services, 9613 100 Street, Morinville, AB, T8R 1L9

If you have any questions about the collection and use of this information, please contact Assessment Services at 780-939-0601 or assessment@sturgeoncounty.ca.

Information collected is protected in accordance with the privacy provisions of the Municipal Government Act and the Freedom of Information and Protection of Privacy Act, R.S.A. 2000, c. F-25. If you have any questions about the data collected, please contact Assessment Services at 780- 939-0601 or email assessment@sturgeoncounty.ca.

### **Agent Representative Authorization**



Tax Year	COUNTY
OWNER/PROPERTY MANAGER INFO  I am identifying myself as an Owner or Authorized Signa I am the:  OWNER  CORPORATE SIGNATORY FOR THE OWNER PROPERTY MANAGEMENT FOR THE OWNER	atory for the accounts listed in the Schedule of Properties.
I (for corporation(s) - name and position of authorized sign	natory must be completed),
Name	, Position
authorize disclosure of information to the agent/representa	tive named below, to review and agree to the assessment of the property.
I understand that this does not constitute a complaint to the A	ssessment Review Board under Section 460 of the <i>Municipal Government Act</i> .
**Mailing Address:	
**Phone Number:	**Email and/or Fax Number:
Owner Name (owner of property):	
**This information is being collected in the event we need to verify any detail	
Property Management Company Name: Property Managers can either provide the signed contract person, or complete Affidavit Form in full.	/agreement confirming authority to act on behalf of the owner/assessed
AGENT/REPRESENTATIVE INFORMA	ATION
Agent / Representative Name:	
Company Name (if applicable):	
Mailing Address:	
Phone Number:	E-mail or Fax Number:
I hereby authorize that the information provided on complete, accurate and contains no misrepresentat	

Signature of Owner/Authorized Signatory:

## Schedule of Properties ASSESSMENT AND TAXATION



All forms are to be signed by the property manager or authorized signatory before the Assessment Services department will release information relating to these properties. If you have more properties, you can complete an additional form or attach your own schedule of properties containing the information below.

Account Number (if known)	Owner Name	Property Address (in Sturgeon County only)	<b>Legal Description</b> (if no civic address)	Approved or Invalid Reason (Internal use only)

I hereby authorize that the information provided on this Authoriza accurate and contains no misrepresentations.	tion of Agency by me herein is complete,
Signature of Owner/Authorized Signatory:	Date:

#### RETURN THE COMPLETED FORMS BY:

**E-mail:** assessment@sturgeoncounty.ca

Mail: Assessment Services, 9613 100 Street, Morinville, AB, T8R 1L9