

REPRESENTATION AUTHORIZATION

I, _____, hereby give The Tax Opposer organization by Chad M. Hummel, Steve Felano or any of its agents, employees or assignees, permission to represent me at the **Town** of _____ informal assessment review hearing or meeting, grievance day on **May 27, 2025** and/or Small Claims Assessment Review hearing. These hearings/meetings are in regards to the grievance application on my property located at:

Property Address: _____.

I certify that I am current owner or authorized agent of/for the above referenced property. I have read and understand the above statement regarding the assessment review application and hereby give permission for this process to be conducted and that the above person(s) may act as my advocate in all matters pertaining to my 2025 assessed value. You understand and acknowledge that Chad M. Hummel is a licensed attorney in New York State; however neither he, nor anyone affiliated with *The Tax Opposer*, has rendered you legal advice; nor is he, or anyone acting on his behalf, acting as your attorney in connection with this process. If you require and/or desire legal advice in this matter, you may wish to consult independently with an attorney or discuss retaining Chad M. Hummel in that capacity.

I acknowledge that I have provided truthful and accurate information regarding my property to *The Tax Opposer* and understand that the information is being used in proceedings that are governed by the laws of the State of New York and the information may be used under oath and subject to penalties of perjury.

I AUTHORIZE *THE TAX OPPOSER* TO ENTER INTO ANY SETTLEMENT OF THE CASE AT ANY TIME AFTER THIS IS SIGNED, IN THEIR BEST JUDGMENT, WITH OR WITHOUT INPUT FROM THE HOMEOWNER.

Signature: _____

Dated: _____
THIS DOCUMENT MUST BE DATED IN 2025

Property owner name: _____
PLEASE PRINT YOUR FULL NAME

Please fill in the form above; sign and date this Authorization and return it to us at 530 Titus Avenue Rochester, New York 14617 or scan and email it to lowertaxes@thetaxopposer.com

Contact Email: _____

Contact Phone: _____