Nevada State Board of Equalization

Agent Authorization Form

Return this Agent Authorization Form to:
Nevada State Board of Equalization
c/o Nevada Department of Taxation
1550 College Parkway, Suite 115
Carson City, NV 89706

Attach this sheet to the Petition submitted to the State Board of Equalization if an agent is authorized to represent the Petitioner.

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

1.) _____All the properties owned by the Petitioner in Nevada;

2.) _____All the properties owned by the Petitioner in _____County, Nevada; or

3.) _____Authorization is limited to the following properties:

APN or Parcel Identifier Number: _____

_____

The Petitioner's agent is authorized to file petitions during the _____ calendar year; receive all notices and decision letters related thereto; and represent the Petitioner in all related hearings and matters before the Nevada State Board of Equalization.

_____ _____ _____
*Petitioner Signature Title Date

**If the Petitioner is a corporation, limited partnership, or a limited liability company, the agent authorization must be signed by an officer or authorized employee of the business entity.*

Authorized Agent Contact Information:

SUELLEN FULSTONE, JASON GUINASSO, LITTLER MENDELSON
Name of Authorized Agent

Contact Person (If different than Agent name)

50 W LIBERTY STREET, SUITE 400
Street Address

Mailing Address (If different from street address)

RENO, NV 89501
City

State Zip Code

(775) 785-6396
Daytime Telephone Number (include area code)

(775) 562-8062
Fax Number (include area code)

E-mail address