



IREDELL COUNTY
DEPARTMENT OF TAX ADMINISTRATION AND LAND RECORDS
Board of Equalization and Review
Post Office Box 1027
Statesville, North Carolina 28687
Telephone: 704.928.2043 Fax: 704.878.3003

POWER OF ATTORNEY

Know all men by these presents that I, _____, in the County of _____, State of _____, City of _____, do hereby make, constitute and appoint, _____, my true and lawful attorney in fact to appear for me and represent me before the board of county commissioners or the county board of equalization and review in the County of _____, in connection with any matter involving the ad valorem taxation of the property described below; I grant unto said attorney in fact the full power and authority to appeal the property tax value assigned by the County to the described property, and the power to make full and complete settlement or other disposition of the matter; I hereby authorize the said County to disclose to my attorney in fact all information used by the County in connection with the listing, appraisal, or assessment of the said property, including specifically information of a confidential nature.

I understand that in the event of an adverse decision by either County Board, that if this matter is appealed to the North Carolina Property Tax Commission, the property tax value may be lowered, left unchanged, or increased as a result of the appeal. I also understand that my attorney in fact, unless he/she is an attorney at law, authorized to practice law in the State of North Carolina will **not** be allowed to prepare or file any documents with the North Carolina Property Tax Commission or represent me at any hearing to be held before the Commission, for such representation would constitute the unauthorized practice of law.

The specific property which my attorney in fact is authorized to appeal is described as follows:

NOTE: PLEASE USE THE PROPERTY TAX PARCEL IDENTIFICATION NUMBER(S) FOR REAL PROPERTY; PERSONAL PROPERTY SHOULD BE DESCRIBED AS CLEARLY AS POSSIBLE. ATTACH ADDITIONAL INFORMATION SHEETS IF NECESSARY.

I am the record owner of the property described above: YES NO (circle one). If No, please identify the record owner and state the relationship between the record owner and the person executing the power of attorney. _____

Witness my hand this, the _____ day of _____, 20____ .

TAXPAYER

STATE OF _____

COUNTY OF _____

The foregoing instrument was duly acknowledged before me by _____ for the uses and purposes therein expressed.

Witness my hand and seal this, the _____ day of _____, 20____ .

My commission expires: _____

Notary Public