



# County of Allegheny



## BOARD OF PROPERTY ASSESSMENT, APPEALS & REVIEW

### Appeals Appointment of Authorized Representative

Parcel ID: \_\_\_\_\_ Tax Year: \_\_\_\_\_

Property Address: \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip Code)

Appellant Name: \_\_\_\_\_  
(Last) (First) (MI)

Appellant Mailing Address: \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip Code)

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

I hereby appoint the following individual or company as my authorized representative to act on my behalf and attend the assessment appeal hearing of the Board of Property Assessment, Appeals & Review.

#### Authorized Representative Information

Name & Firm / Company: \_\_\_\_\_

Representative Address: \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip Code)

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

I may revoke this appointment by forwarding a letter of my intent to the Board of Property Assessment, Appeals & Review at any time prior to hearing.

\_\_\_\_\_  
*Signature of Appellant* \_\_\_\_\_  
Date

#### PROPERTY ASSESSMENT USE ONLY:

Received: \_\_\_\_\_

Data Entry: \_\_\_\_\_

QA/QC: \_\_\_\_\_

INITIALS AND DATE MUST BE FILLED IN ALL LOCATIONS

**Submit signed, completed forms in advance of your scheduled hearing.**

MAIL to: Office of Property Assessments  
542 Forbes Avenue, Room 334  
Pittsburgh, PA 15219  
attn: Appeals Department

**OR**

EMAIL to: [AnnualAppeals@AlleghenyCounty.US](mailto:AnnualAppeals@AlleghenyCounty.US)

**Note:** The representative may not receive a copy of the disposition if this form is not filed in advance of the hearing.