



**WILL COUNTY BOARD OF REVIEW
302 N. CHICAGO ST, 2ND FLOOR
JOLIET, ILLINOIS 60432**

Verification of Authority to Represent Owner(s) of Real Property

I, _____, hereby authorize the following attorney to represent
(print name/title of authorized property holder)
me in the assessment complaint(s) and hearing(s) before the Will County Board of Review for the 20____ tax
levy year. **This authorization form is valid only for the current tax assessing levy year.**

Permanent Index Number: _____
(For additional parcels attach the official addendum)

Attorney (print first & last name)

ARDC#

Name of Law Firm (print)

Law Firm's Address (print)

IL

Email address (print)

Telephone Number

Owner's Signature(s)

Check applicable holder of ownership:

Owner's Phone Number

- | |
|--|
| ☐ Owner of property |
| ☐ Manager of LLC/ CORP./INC. |
| ☐ Beneficiary/ Trustee of Trust |
| ☐ Other _____ |

Date

State of _____ County of _____

Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20____
by _____, provided to me on the basis of satisfactory evidence to be the person(s)
who appeared before me.

Notary Public Signature

Date

Notary Stamp

