

# BOE AGENCY AUTHORIZATION FORM

St. Louis County Board of Equalization (BOE)  
41 S. Central Avenue, Clayton, MO 63105

**Real and/or Personal Property - All blanks must be completed legibly and in ink.**

This is to authorize \_\_\_\_\_ (company or agent name), to act on my/our behalf as my/our agent in the appeal of the assessment of the property/properties listed below, which is/are located in St. Louis County and is/are owned by the undersigned.

This agent is given full authority to handle all matters relative to the appeal of the assessment for the tax year \_\_\_\_\_, and to represent me/us, with the assistance of legal counsel, if necessary, before the St. Louis County Board of Equalization.

**Owner's Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Daytime Phone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Owner/Authorized Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Title (if Corporation):** \_\_\_\_\_ (President, CEO, etc.)

**Agent/Company Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Daytime Phone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Agent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Title (if Corporation):** \_\_\_\_\_ (President, CEO, etc.)

**Property Locator/Account Number(s):** \_\_\_\_\_ **Property Address(es):** \_\_\_\_\_

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(Complete additional authorization forms, if needed)

(Agency Auth. 2011)