

**SOMERVILLE BOARD OF ASSESSORS  
93 HIGHLAND AVENUE  
SOMERVILLE, MA 02143**

**TELEPHONE 617-625-6600  
FAX 717-776-6042**

LETTER OF AUTHORIZATION\*

The Board of Assessors request a letter of authorization for anyone who has retained a taxpayer representative to act in their behalf in the filing of overvaluation applications. Please fill out the following information, date and sign below. Thank you for your co-operation.

I, \_\_\_\_\_, owner/primary taxpayer of property located at  
\_\_\_\_\_, Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_,  
hereby authorize \_\_\_\_\_, to act as my  
representative in filing a FY2002 overvaluation application.

Owner/taxpayer \* \_\_\_\_\_

Date \_\_\_\_\_

**\*This form is to be signed by the property owner and/or taxpayer only.**