



**Pittsylvania County Office of Reassessment  
Board of Equalization**

PO Box 426

Chatham, VA 24531

**Telephone:** 434-432-7816 **Email:** reassessment@pittgov.org

**Internet:** <https://www.pittsylvaniacountyva.gov/>

**LETTER OF AUTHORIZATION FOR REPRESENTATION**

**To the Board of Equalization of Pittsylvania County, Virginia:**

As owner of record of the subject parcel, I hereby appoint the following individual/firm to represent me for my real estate assessment appeal before the Pittsylvania County Board of Equalization (BOE). I hereby consent to the release of all information concerning my appeal to my representative. By completing and executing this Letter of Authorization for Representation, I acknowledge that only one appeal per parcel is permitted. My signature constitutes an acknowledgment that information submitted to the BOE may be subject to public disclosure pursuant to the Virginia Freedom of Information Act, *Code of Virginia* § 2.2-3700, et seq.

An original letter of authorization (LOA) form must be submitted.

A single LOA may be submitted for multiple parcels having the same owner.

Parcel Identification Numbers /GPIN Numbers (xxxx-xx-xxxx):	
Property Address (if applicable):	
<b>OWNER OF RECORD MAKING REQUEST</b>	
Last, First Name:	
Contact Number:	Email:

**REPRESENTATIVE/AGENT INFORMATION**

If property is titled in the name of a corporation, the authorization must be signed by an officer of the corporation who is authorized to act on its behalf. Management companies and other third party signatures are not acceptable.

**Appeal results are mailed only to the address listed in the real estate tax records.**

Print Name and Sign:	
Mailing Address:	
Telephone Number:	Email:

**SIGNATURE OF REQUESTING OWNER**

Print Name and Sign:	Date:
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**NOTARIZATION**

State Of:	City/County Of:
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The foregoing statement was subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ by \_\_\_\_\_ (insert name of affiant).

Notary Name and Signature:	
Registration #:	Commission Expires: