



**WILL COUNTY BOARD OF REVIEW  
302 N. CHICAGO ST, 2<sup>ND</sup> 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)

\_\_\_\_\_  
Owner's Phone Number

\_\_\_\_\_  
Date

Check applicable holder of ownership:

- Owner of property
- Manager of LLC/ CORP./INC.
- Beneficiary/ Trustee of Trust
- Other \_\_\_\_\_

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

