

## 2021 PROPERTY ASSESSMENT REQUEST FOR INFORMATION

Assessed Person's Property Information - Section 299

Fees and Rates Bylaw

This form is required when an assessed person or authorized agent is seeking confidential property information about how the assessor assessed a person's property pursuant to Section 299 of the *Municipal Government Act (MGA)*. Only one owner (individual or corporation) is allowed per request form.

Assessed person is defined in the MGA, Part 9 as "a person who is named on an assessment roll in accordance with Section 304". If the Assessed person is a company or corporation, verifiable proof of signing authority is required to be submitted along with this form for the person signing in place of "signature of assessed person", before the request will be processed.

SECTION A: Assessed	d Person Information			
Name of Assessed Person				
	Exact individual or corporation name as registered at Land Titles.			
Contact Name (If owner is	s a Corporation):			
Mailing Address:				
Phone Number:	none Number: E-mail:			
Signature of Assessed Pers	son:			
SECTION B: Authoriz	zed Agent/Representative Information			
**Please attach a (2022 tax	year) letter of authorization to this request.			
Authorized Corporation N	Name: Representative Name:	Representative Name:		
Phone Number:	E-mail or Fax Number:	E-mail or Fax Number:		
information pertaining to r	lerstand that I am authorizing the above noted representative to my property under section 299 of the Municipal Government Action:	•		
SECTION C: Informa	tion Requested			
Identify the property(ies) y	you would like a complete Section 299 package for.			
Roll Number	Property Address or Legal Description of Assessed Person's Property	Internal Use Only		



**SECTION D: Preferred Delivery Method** 

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	E-mail:			
	Mail (Paper Copy)			
	Pick-up (Paper Cop	у)		
SEC	TION E: Acknowledg	ment and Ce	rtification	
By sig	gning, I acknowledge a	and certify tha	nt:	
l.	I understand that I am requesting property assessment information pertaining to the roll number(s) identified in Section C for the current assessment year only.			
II.	when the submission o	of verifiable prod	oviding this information will commence, if applicable, of that the person signing in place of the assessed person assessed person, by the Town of Westlock.	
III.	I understand that upon will provide the inform	receiving the for	ully completed documentation, the Town of Westlock roperty in compliance with the regulations within fifteen e on the Town's website.	
Signa	ature of Assessed Pers	on or Agent/I	Property Representative:	
Print	ed Name of Signatory	Person and	Γitle:	
Date	:		_	
Pleas	se send this completed			
form and any other documentation to:		Email:	finance@westlock.ca	
		Fax:	780-349-4436	
		Mail:	Town of Westlock 10003 106 Street Westlock, AB T7P 2K3	
If you				