FLORIDA DEPARTMENT OF REVENUE

DR-486POA
N. 01/17
Rule 12D-16.002
F.A.C.
Eff. 01/17

POWER OF ATTORNEY FOR REPRESENTATION BEFORE THE VALUE ADJUSTMENT BOARD

Section 194.034(1)(b), Florida Statutes

You may use this form to grant power of attorney for representation in value adjustment board proceedings. This form or other power of attorney accompanies the petition at the time of filing.

COMPLETED BY PETITIONER

I, _____ (name), appoint _____ (name) as my attorney-in-fact to present evidence and testimony and act on my behalf in any lawful way before the WASHINGTON County Value Adjustment Board.

This power of attorney is effective immediately and is valid only for one assessment year.
This power of attorney is limited to the 20__ assessment year concerning the parcel(s) or account(s) below.

☐ I authorize the person I appointed above to have access to confidential information related to the following parcel(s) or account(s).

Parcel ID/Account #		Parcel ID/Account #	
Parcel ID/Account #		Parcel ID/Account #	
Parcel ID/Account #		Parcel ID/Account #	
Parcel ID/Account #		Parcel ID/Account #	

This power of attorney is further limited as follows:

_____ Signature of taxpayer/owner

_____ Print name

_____ Date

State of Florida
County of WASHINGTON

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____ (name), who signed in the presence of these witnesses:

_____ Witness signature

_____ Witness signature

Personally known OR produced identification

Type of identification produced _____

_____ Signature of Notary Public

_____ Print, type, or stamp commissioned name of Notary Public