



BONNER COUNTY BOARD OF EQUALIZATION

Affidavit of Property Owner

Only to be used if you choose to have someone appear on your behalf at the hearing.

STATE OF \_\_\_\_\_ )

COUNTY OF \_\_\_\_\_ )

The undersigned, being first duly sworn upon oath, testifies as follows:

1. I am over the age of 18 years, I make this affidavit voluntarily, and I am competent to testify concerning the matters stated herein based upon my personal knowledge.
2. \_\_\_\_\_ is the property owner of \_\_\_\_\_.  
(Individual or business entity name) (Parcel Number)
3. I am hereby the owner of, or am authorized to act on behalf of the owner, of the above-named real property. If signing on the behalf of a business entity, please state the capacity in which you are appearing for the business and/or state your title. (President, CEO, managing member, managing partner, etc.)  
  
\_\_\_\_\_
4. I hereby authorize the person(s) indicated below to serve as my representative at the Bonner County Board of Equalization hearing concerning this property. (If naming a representative to appear on your behalf.)  
  
\_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
(Day) (Month) (Year)

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

SUBSCRIBED AND SWORN before me, a Notary Public for the State of \_\_\_\_\_, this  
\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
(Day) (Month) (Year)

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_  
Residing at: \_\_\_\_\_  
Commissioner Expires: \_\_\_\_\_