

Authorization To Release Information

(for release of confidential information)

Account No.

Property Address

☐ I certify under penalty of perjury under the laws of the State of Colorado that I am the owner of the above property, and I hereby authorize:

Agent's Name:

Agent's Telephone No.:

to view and/or purchase any confidential records in the Assessor's possession pertaining to my property.

Information requested:

Exceptions:

Date

Property Owner

Daytime Contact Number

Appraisers, Brokers or Agents:

☐ I certify under penalty of perjury under the laws of the State of Colorado that I have been authorized by the owner of the above property *or other authorized party* to view and/or purchase any confidential records in the Assessor's possession pertaining to the subject property.

Date

Name

Contact Telephone No.

Colorado Appraisal/Broker License No.
or other, if applicable

Identification verified by:	Date:
Comments:	<input type="checkbox"/> Original Scanned & uploaded