



75A Lake Rd., #338  
Congers, NY 10920  
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[www.TaxReductionProfessionals.com](http://www.TaxReductionProfessionals.com)

### Agreement and Designation of Representative

I hereby authorize and direct Tax Reduction Professionals Inc. to act as my exclusive agent and to file Complaint and/or Petition to challenge my real property tax assessment for the 2024/25-tax year (filing occurs during calendar year 2024). As my exclusive agent, Tax Reduction Professionals Inc. will act on my behalf in any and all proceedings before the Town Board of Assessment Review of my real property and/or the Small Claims Assessment Review of the NYS Supreme Court. As petitioner, I declare that I am (A) an owner of the subject property, or (B) an authorized agent of the owner, or (C) an agent of the estate which owns the property, or (D) a person contracted to purchase the subject property.

I understand that Tax Reduction Professionals Inc. will negotiate any settlement on my behalf with regards to the assessment of my real property for the 2024/25-tax year with the Town assessing authority of the property. I understand that Tax Reduction Professionals Inc. will make reasonable effort to communicate any such offer of settlement, unless such offer is made during a meeting with town representative or trial. Tax Reduction Professionals Inc. may collect and deposit any refund checks due and deduct their fee from such refund. I understand that I have the right to completely cancel this agreement within five days in writing.

I agree to pay a fee equal to **50%** of the reduction in my 2024/25 property taxes. The fee is due and payable within 30 days of being notified by Tax Reduction Professionals Inc. of reduction by the Town assessing authority or Supreme Court Judgment. A \$30 Supreme Court filing fee will apply only if appeal needs to be filed with the Court. Tax reduction is based on the total assessment reduction obtained from the level of the tentative assessment roll for the 2024/25-tax year.

**If there is no reduction, there is no fee.**

Signature (Any Owner): \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Property Address: \_\_\_\_\_ Email: \_\_\_\_\_

Subject Property Section / Block / Lot: \_\_\_\_\_ (For Office Use Only)

Please email this form to [info@taxreductionprofessionals.com](mailto:info@taxreductionprofessionals.com) or Fax to 845-520-3161

Or mail it to the above Address