



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 “signing in place of assessed person”, before the request will be processed.

SECTION A: ASSESSED PERSON INFORMATION

Name of Assessed person: (Exact individual or corporation name as registered at Land titles: _____

Contact Name (if owner is a Corporation): _____

Mailing Address: _____

Phone Number: _____ E-mail: _____

SECTION B: Authorized Agent/ Representative Information

**** Please attach a (2020 tax year) letter of authorization**

Authorized Corporation Name: _____ Representative Name: _____

Phone Number: _____ E-mail : _____

I, the assessed person understand that I am authorizing the above noted representative to request information pertaining to my property under section 299 of the Municipal Government Act.

SECTION C: Information Requested

Identify the properties you would like a complete *Section 300* package for.:

Assessment Roll Number	Property Address or Legal Description	Internal Use Only



SECTION D; Preferred Delivery Method

- E-mail: _____
- Fax: _____
- Mail (Paper Copy; _____
- Pick-up (Paper Copy :

SECTION E: Acknowledgement and Certification

By signing, I acknowledge and certify that:

- i) 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) I understand that the Town of Mundare will provide the information for the property in compliance with the regulations within fifteen days.

Signature of Assessed Person or Agent/Property Representative: _____

Printed Name of Signatory Person and Title: _____

Date: _____

Please send this completed form and any other documentation to:

Email: CAO@mundare.ca

Fax: (780)764-2003

In Person: Attn: Colin Zyla, Chief Administration Officer
5128-50 Street

Mail: Attn: Colin Zyla, Chief Administration Officer
Box 348
Mundare, AB TOB 3H0

If you have questions regarding this form, please contact the Town of Mundare at (780) 764-3929