



COUNTY OF LEHIGH  
Board of Assessment Appeals

**Attorney Authorization Agreement**

Tammi S. Bateman  
Chairperson

Donald H. Senderowitz  
Secretary

Joseph J. McDermott

Rebecca J. Price  
Solicitor

**Property Owner/  
Owner of Record:**

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**Property Address:**

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**Parcel Number:**

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**Municipality:**

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Date: \_\_\_\_\_

Lehigh County Board of Assessment Appeals

The purpose of this letter is to advise you that the above listed property owner(s) has retained the services of the following law firm/attorney:

\_\_\_\_\_  
Name of Firm/Attorney

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

Please allow the above mentioned to handle our tax appeal for the above referenced property for the tax year \_\_\_\_\_.

Thank you for your consideration.

\_\_\_\_\_  
Property Owner (Printed)

\_\_\_\_\_  
Property Owner Signature \*

\*Attorney Authorization Agreement must include an original property owner signature. \*

*Lehigh County Government Center  
17 South Seventh Street, Room 517  
Allentown, Pennsylvania 18101-2401  
Phone: 610-782-3038  
Fax: 610-871-1442*