

**TOWN OF GOSHEN**  
**Board of Assessment Appeals**

**AGENT'S CERTIFICATION**

TO WHOM IT MAY CONCERN:

I, \_\_\_\_\_ being the legal owner of property located at:

\_\_\_\_\_

Hereby authorize \_\_\_\_\_ to act as my agent in all matters

before the Board of Assessment Appeals of the Town of Goshen, State of Connecticut.

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_ Grand List Year: \_\_\_\_\_