

**FORM 4
CERTIFICATE OF AGREEMENT**

Municipal Board File #:

Appellant:

Name: _____

Mailing Address: _____

Phone #: _____ Fax #: _____ e-mail address: _____
(optional)

Property under Appeal:

Owner: _____ Roll #: _____
(if different than the Appellant)

Address or _____
Legal Description: _____ Municipality: _____

Assessed Value: _____ Classification: _____

Business Assessment: _____ Supplementary Assessment: _____
(effective date(s)):

(As ordered by the Board of Revision)

Recommended Assessment:

The undersigned jointly recommend the change of assessment in regard to this property for the assessment year(s) specified to be as indicated.

Assessed value: _____

Classification: _____

Assessment year(s): _____

Explanation of Change: (Show valuation method and calculations for determining value plus any other relevant details and provide supporting reasons for change in classification. Attach separate sheets if necessary.)

We, the undersigned, agree to the change in assessment recommended above and consent to an Order of The Municipal Board changing the assessment accordingly.

Date

Appellant

Date

Respondent

If the Provincial Municipal Assessor is a party to the Appeal, the Chief Administrative Officer of the Municipality was given notice of the recommended change on _____, 20____.