#### AGREEMENT AND POWER OF ATTORNEY

This AGREEMENT AND POWER OF ATTORNEY is made and entered into on the date set forth below ("Agreement") by and between \_\_\_\_\_\_\_\_("Owner") and Lisa Fishbein, Esq. ("Attorney") with respect to \_\_\_\_\_\_\_\_, Illinois ("Property"). Owner and Attorney agree as follows:

- 1. <u>Tax Appeal and Documentation</u>. Attorney will evaluate the Property to determine whether a property tax appeal is warranted for the Property. If, in Attorney's opinion, a property tax appeal is so warranted, Attorney will prepare, file and present the appeal of the Property to the proper non-judicial reviewing authorities. Owner will provide the necessary documentation for Attorney to prosecute the appeal. The terms and provisions of this Agreement shall apply to Attorney's appeal for *tax year 2025* and the property tax reductions which result from said appeal in *tax year 2025*.
- 2. <u>Contingent Fees</u>. Owner will pay Attorney contingent fees (for pursuing the appeal described above) as follows: (i) 50% of the property tax reduction or refund for the Property for *tax year 2025*. The amount of the property tax reduction for *tax year 2025* shall be equal to the difference between: (a) the tax liability which would have been incurred based upon the Assessor's valuation for the Property prior to Attorney's appeal; and (b) the reduced tax liability for the Property resulting from Attorney's efforts. The fee shall be due upon invoice, which Attorney will mail to Owner following the appeal using the last ascertainable tax rate and IL state equalization factor. Additionally, there shall be a \$100 non-refundable retainer fee due at the time of execution of this agreement.
- 3. <u>Power of Attorney</u>. Owner hereby appoints Attorney to appear and act on behalf of Owner with respect to the property tax appeal described in this Agreement before the proper reviewing authorities. Owner further empowers Attorney to take all reasonable steps in said matter deemed advisable to secure a reduction in the assessed valuation of the Property. Upon completion of the work described herein, this Power of Attorney shall become void.
- 4. <u>Miscellaneous</u>: This Agreement represents the complete understanding and agreement of the parties. Owner acknowledges that Attorney has made no guarantee regarding her ability to secure any reduction in valuation for the Property.
- IN WITNESS WHEREOF, Owner and Attorney have executed this Agreement this \_\_\_\_ day of \_\_\_\_\_, in Cook County, Illinois.

Owner

Attorney

Owner

P.I.N.: Phone: Email:

COOK COUNTY ASSESSOR			COUNTY ASSESSOR'S OFFICE DRTH CLARK STREET, RM 320		
Fritz Kaegi		PHONE: 312.443.7	PHONE: 312.443.7550 WWW.COOKCOUNTYASSESSOR.COM		
-	/ Representat	ive			
Appeal Year Autho	orization Form	Town	Appeal Number		
Property Index Number(s)	Owner / Tax	payer			
Property Index Number(s)	Owner's Ma	iling Address			
Property Street Address	City	Sta	ate Zip		
City State Zip	Daytime Pho	one Number			
Township	Email Addre	SS			
I, Name of Affiant	being first o	duly sworn on oath state			
1. That I am <i>(please check one)</i> : 🔲 An <b>Owner</b> of	the property described ab	ove			
A Lessee of t	he property described abo	ove			
🗌 A Tax Buyer	of the property described	above (year(s) purchased)			
-	ized <b>Officer/Agent</b> of the artnership which owns the		)ve		
2. I have sufficient knowledge of the operations	of the above property to e	execute this affidavit			
3. I have personal knowledge that the above pro	operty:				
☐ has been purchased within the last 3	years				
☐ has been refinanced within the last 3	years				
If sold or refinanced:					

**Purchase Price** 

Date of Purchase

Type of Rate: 🔲 Fixed	Variable	Interest Rate:	%
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# COOK COUNTY ASSESSOR

FRITZ KAEGI



COOK COUNTY ASSESSOR'S OFFICE 118 NORTH CLARK STREET, RM 320 CHICAGO, IL 60602 PHONE: 312.443.7550 WWW.COOKCOUNTYASSESSOR.COM

#### Attorney / Representative Authorization Form

- 5. that any income and expense information provided by me, either directly or through my representative, accurately reflects the result of the operations;
- 6. that I am familiar with the day-to-day operations and the financial records and statements concerning the subject property; and
- 7. that any and all documentation and supporting data to be tendered to the Cook County Assessor's Office by my attorney or representative are true and accurate, and further that any documents which purport to have been filed with any government agency, including the Internal Revenue Service, were, in fact, so filed.

Further affiant sayeth not.

Signature of Owner/Lessee

Print Name

Date

Daytime Phone Number

As appointed attorney or representative for the owner/lessee of the property described above, I affirm that I have read the Cook County Assessor's Rules for Filing Appeals.

Signature of Attorney/Representative	Firm Name	Firm Name		
Print Name	Street Address	Street Address		
Date	City	State	Zip	
Atty / Rep Code	Daytime Phone Number			

## COOK COUNTY BOARD OF REVIEW 2025 ATTORNEY AUTHORIZATION FORM

2025 Complaint No		Township:
PIN(s):		
Address:		
City:	State:	ZIP Code:

### **ATTORNEY AUTHORIZATION**

1. I am a/an (check applicable)

- owner, executor, trust beneficiary of this property; or
- a lessee (tenant) liable for the real estate taxes of the property for this tax year; or

a former owner liable for the real estate taxes of the property for this tax year; or

a duly authorized officer of the

Purchase Price: \$

Corporation, Partnership, LLC, or other entity which owns the property described above.

2. I have personal knowledge that the property described above

has not been purchased since January 1, 2022; or

has been purchased on or after January 1, 2022 (complete below)

Date of Purchase:

3. For assessment year 2025, I explicitly authorize the following Attorney/law firm:

to represent me before the Cook County Board of Review in connection with the assessment of the above mentioned property. Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters therein stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that he/she verily believes the same to be true.

Print Name of Affiant /Owner/Appellant Signature of Affiant /Owner/Appellant

Date:

I certify that I have entered into the attorney/client relationship with the affiant and that I have read the accompanying assessed valuation complaint and supporting documents. Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters therein stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that he/she verily believes the same to be true.

Signature of Attorney

Date:

BOR Atty. Code