



# EQUITABLE PROPERTY TAX REDUCTIONS, INC.

15 Magnolia Rd, Scarsdale, NY 10583 914-980-8285 Fax 914-574-5980 www.equitablepropertytaxreductions.com  
Lisa@equitablepropertytaxreductions.com

## AUTHORIZATION FOR 2025/2026 PROPERTY TAX ASSESSMENT GRIEVANCE

**DESIGNATION OF REPRESENTATIVE** – I, the undersigned, authorize Equitable Property Tax Reductions, Inc. (“Equitable”) to act as my sole and exclusive representative in any and all proceedings before the Assessor, Board of Assessment Review, and the Small Claims Assessment Review of the NYS Supreme Court in Westchester County for purpose of reviewing the assessment of my real property as it appears on the 2025 Assessment Roll (2025-2026 Tax Roll) of such assessing unit. I authorize my City/Town/Village Assessment Department(s) to communicate and negotiate directly with Equitable in all matters relating to this property tax assessment grievance.

**SERVICE TO BE PERFORMED** – By signing this agreement, I am directing Equitable to prepare and file my 2025/2026 property tax assessment grievance and to prepare and present a Comparable Sales Analysis for the purpose of reviewing the assessment of my real property. I authorize Equitable to negotiate and enter into an assessment reduction settlement on my behalf.

**FEE FOR SERVICE** – There is NO FEE if there is NO assessment reduction. If there is an assessment reduction, I agree to pay Equitable a discounted fee equal to 50% of the first-year tax savings, payable within 30 days of postmark on the envelope and/or date of the email that contains Equitable’s invoice and a copy of the official assessment reduction notice. I agree to pay the NYS Small Claims Assessment Review court-imposed filing fee of \$30 if a Small Claims Assessment Review appeal is necessary. The first-year tax savings equals the assessment reduction multiplied by the tax rates in effect as of the year in which the grievance is filed prior to exemptions. The full undiscounted fee of 75% of the first-year tax savings will be due if payment is not made within 30 days of postmark on the envelope and/or date of the email. A late fee of \$100 and a charge of 2% per month will also be due. If collection process is needed, an additional fee of 2% will apply on any outstanding balance along with reasonable attorney’s fees Equitable incurs as the result of collecting payment from me. I agree that courts located in Westchester County, NY shall have exclusive jurisdiction regarding any action to enforce this agreement and that in any such proceeding, service of process upon me may be made by mailing process to me at the property address unless Equitable receives written notice from me of a different mailing address. Equitable is also permitted to negotiate any refund check obtained, to deduct its fees from the refund, and to remit to me the balance. I understand that this Agreement may not be assigned and that I shall remain responsible to pay Equitable its fee even if the property is transferred or sold or listed for sale. In the case of a duplicate filing, or I request to have my case withdrawn or have Equitable removed/replaced as my sole and exclusive representative, I will owe Equitable a fee equal to 50% of the tax savings based on a 25% reduction of assessment.

**CANCELLATION** - I may cancel this application with Equitable in writing, with no penalty or obligation, within 3 days of signing this agreement.

**ELIGIBILITY** - By signing the agreement below, I represent that I am either (1) a person named in the property records of the County Clerk as owner; (2) that person’s authorized agent; (3) a person who has contracted to buy the property; or (4) the estate of a deceased owner.

PROPERTY OWNER NAME(S) (Please Print) \_\_\_\_\_

EMAIL ADDRESS (Please Print) \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_ (City) \_\_\_\_\_ (Zip) \_\_\_\_\_

PHONE (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Mobile) \_\_\_\_\_

OWNER’S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_