

# Request for Electronic Delivery of Communications with a Tax Official

Form 50-843

County \_\_\_\_\_

Date Received \_\_\_\_\_

**GENERAL INFORMATION:** Tax Code Section 1.085(a-1) requires a tax official to deliver communications to a property owner or the property owner's designated representative electronically if requested using this form. The election remains in effect until rescinded, in writing, by the property owner or the designated representative.

**FILING INSTRUCTIONS:** This form and all supporting documentation must be filed with the applicable tax official in the county in which the property is located. A separate form must be filed with each tax official. **Do not file this document with the Texas Comptroller of Public Accounts.**

## SECTION 1: Tax Official Selection

Please indicate the tax official with which you are requesting to exchange communications electronically.

Appraisal District     Appraisal Review Board (ARB)     Tax Assessor/Collector

Taxing Unit \_\_\_\_\_

Other designated person performing functions on behalf of a tax official \_\_\_\_\_

## SECTION 2: Property Owner

Property Owner     Partnership     Corporation     Other (specify): \_\_\_\_\_

Name of Property Owner \_\_\_\_\_

Primary Phone Number (area code and number) \_\_\_\_\_

Physical Address, City, State, ZIP Code \_\_\_\_\_

Mailing Address, City, State, ZIP Code (if different than above) \_\_\_\_\_

## SECTION 3: Authorized Representative

**If you are an individual property owner filing this form on your own behalf, skip to Section 4; all other requestors are required to complete Section 3.**

Please indicate the basis for your authority to represent the property owner in filing this application:

Officer of the company     General Partner of the company     Attorney for property owner

Agent for tax matters appointed under Tax Code Section 1.111

Other and explain basis: \_\_\_\_\_

Name of Authorized Representative \_\_\_\_\_

Title of Authorized Representative \_\_\_\_\_

Mailing Address, City, State, ZIP Code \_\_\_\_\_

Primary Phone Number (area code and number) \_\_\_\_\_

## SECTION 4: Property for Which Electronic Communications are to be Exchanged

Appraisal District Account Number(s) \_\_\_\_\_

Legal Description (if known) \_\_\_\_\_

**SECTION 5: Email Address**

Provide the email address to which electronic communications will be delivered for the accounts listed in Section 4:

\_\_\_\_\_  
Email Address\*

**SECTION 6: Certification and Signature**

**If you make a false statement on this form, you could be found guilty of a Class A misdemeanor or a state jail felony under Penal Code Section 37.10.**

"I, \_\_\_\_\_, swear or affirm the following:

Printed Name of Property Owner or Authorized Representative

1. that each fact contained in this request is true and correct;
2. that I authorize to submit and receive electronic documents in a format acceptable by the selected tax official in accordance with Tax Code Section 1.085; and
3. that I have read and understand the *Notice Regarding Penalties for Making or Filing an Application Containing a False Statement.*"

**sign  
here** ▶

\_\_\_\_\_  
Signature of Property Owner or Authorized Representative

\_\_\_\_\_  
Date

\* May be confidential under Government Code §552.137; however, by including the email address on this form, you are affirmatively consenting to its release under the Public Information Act.