



# POWER OF ATTORNEY - PROPOSITION 312

Submit for use with the Application for Reimbursement of Nuisance Mitigation Expenses  
TO BE COMPLETED AND SIGNED BY THE PROPERTY OWNER ONLY

A property owner who wishes to have another individual file an Application for Reimbursement of Nuisance Mitigation Expenses under A.R.S. § 42-17451 (Proposition 312) on their behalf must use this form to appoint an attorney-in-fact. This authorization will expire 90 days after the date of approval or denial issued to the property owner. The property owner may revoke this Power of Attorney - Proposition 312, or the attorney-in-fact may withdraw at any time before its expiration.

Property Owner's Information:		
Property Owner (must match county records)	Application Year	
Street Address of Property	Parcel # or Account #	
City/Town	County	State

Attorney-in-Fact's Information (to be used for all subsequent communications):		
Attorney-in-Fact (individual you wish to act for you in this matter)		
Title (if applicable)	Company (if applicable)	
Mailing Address of Attorney-in-Fact		
City/Town	State	ZIP Code
Telephone Number of Attorney-in-Fact	Email Address of Attorney-in-Fact	

If the property owner is an entity, this Power of Attorney - Proposition 312 must be signed by:

- For a corporation, a principal officer (i.e., a chief executive officer, president, secretary, treasurer, chief financial officer, chief operating officer, or any other corporate officer who has the authority to bind the corporation), any person designated by a principal officer, or any person designated in a resolution by the corporate board of directors;
- For a partnership, any partner of the partnership;
- For a limited liability company, any member if member-managed, or any manager if manager-managed; or
- For a trust, a trustee.

I, the undersigned, appoint the attorney-in-fact named above to act on behalf of the property owner for the process of submitting an Application for Reimbursement of Nuisance Mitigation Expenses pursuant to A.R.S. § 42-17451 for the listed application year. I understand and agree that all information provided on all papers and documents relating to the Application for Reimbursement of Nuisance Mitigation Expenses may be shared with state, county, and city/town officials as necessary and without limitation for the express purposes of administering the provisions of A.R.S. § 42-17451.

By signing this form, I certify that the property owner named above is the fee title holder of the property referenced above. I further certify that I have the authority to execute this Power of Attorney - Proposition 312. I understand that to knowingly prepare or present a document that is fraudulent or false is a Class 5 felony pursuant to A.R.S. § 42-1127(B)(2).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Title, if property owner is an entity

Subscribed, sworn to, and acknowledged before me this date,

State/Commonwealth of	County/Parish of
Signature of Notary Public	My commission expires

[NOTARY SEAL]