

## Form OR-EA, Email Authorization

Name T	Title			
Business name \$	Site number			FEIN
Business address				-
City	State	ZIP		
Authorized email	Phone			
I authorize the Property Tax Division of the Oregon Department of R information. Each Industrial property must submit a seperate <i>Email</i> and I authorize email exchange of confidential information for this return this authorization. This form is effective on the date signed and can	Autho and a	<i>rization form.</i> ny future retu	ırns. I certify that I	have the authority to execute
Signature	Date			
X			/	/
Return this signed form to us at <b>DOR.IPR@dor.oregon.gov</b> or mail	it to:		of Revenue 600	

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