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**Date:** [Insert Date]

[Client Name]

[Client Address]

[City, State, Zip Code]

## **RE: State and Local Property Tax Advisory Services Engagement**

Dear [Contact Name],

This letter confirms the engagement of [Firm Name] ("Consultant") by [Client Name] ("Client") to provide state and local property tax advisory services. The terms of our agreement are outlined below.

### **1. Scope of Services**

Consultant will perform the following services for the tax year(s) [Insert Years]:

- Review of real and/or personal property assessments.
- Identification of potential tax savings through valuation analysis or exemptions.
- Preparation and filing of property tax returns or renditions.
- Representation of Client in administrative appeals and informal negotiations with taxing authorities.
- Monitoring of tax bills and assessment notices.

### **2. Client Responsibilities**

Client agrees to provide all necessary documentation in a timely manner, including but not limited to: fixed asset ledgers, closing statements, income and expense statements, and prior tax bills. Consultant shall rely on the accuracy of the information provided by Client without independent verification.

### **3. Fees and Billing**

Fees for services rendered will be based on the following structure:

- **Contingency Fee:** [Percentage]% of the total tax savings achieved.
- **Fixed Fee:** \$[Amount] per tax year/filing.
- **Hourly Rate:** \$[Amount] per hour for specialized consulting.

Invoices are payable within [Number] days of receipt. Out-of-pocket expenses such as filing fees or travel will be billed at cost.

### **4. Term and Termination**

This agreement remains in effect until the completion of services for the specified tax years. Either party may terminate this agreement upon [Number] days' written notice. If terminated, Client remains responsible for fees incurred for work performed up to the termination date.

## **5. Limitation of Liability**

Consultant's liability for any claim arising out of this engagement shall be limited to the total fees paid by Client under this agreement.

## **6. Governing Law**

This agreement shall be governed by the laws of the State of [State Name].

Please indicate your acceptance of these terms by signing below.

Sincerely,

[Consultant Signature]  
[Consultant Name and Title]  
[Firm Name]

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### **Accepted and Agreed:**

Signature: \_\_\_\_\_  
Name: [Client Representative Name]  
Title: [Title]  
Date: \_\_\_\_\_