WETHERSFIELD BOARD OF ASSESSMENT APPEALS

Pursuant to CGS §12-111, an application to appeal an assessment for the March hearings must be received **ON OR BEFORE**MARCH 20, 2023. Postmarks are NOT considered timely filings. Appeals not received by the statutory Grievance Day will be denied.

(*) fields are required by Connecticut General Statute. Type or print clearly. <u>Incomplete applications will not be accepted.</u>
Applications should be sent to:

Board of Assessment Appeals, c/o Assessor's Office, 505 Silas Deane Hwy, Wethersfield, CT 06109

APPLICATION TO APPEAL MOTOR VEHICLE GRAND LIST OF (check one): ☐ OCTOBER 1, 2021 SUPPLEMENTAL ☐ **OCTOBER 1, 2022** 1. *Property Owner's Name: *Phone: 2. *Appellant's Name:______ *Phone:_ 3. *Contact & Correspondence: Name: Phone: Address: Email: City/State/Zip: Fax: 4. *Vehicle Description: *Year_____*Make_____*Model____*VIN_____ Mileage as of 10/1/22 (or date of purchase for Supplemental):_____ *Estimate of Value as of 10/1/22 (or date of purchase for Supplemental): \$ (Motor Vehicle values are based on NADA Clean Retail values. Kelly Blue Book, Edmonds, etc. are not accepted as proof of value.) 5. *Reason for Appeal: 6. *Signature of Owner or Authorized Agent (attach evidence of authorization): I do solemnly swear that the testimony I am about to give regarding the aforementioned property is true and accurate to the best of my knowledge and remembrance. I understand all documents presented will be retained and shall be a matter of public record. ___DO NOT WRITE BELOW THIS LINE___ **BOARD'S DECISION:** ☐ NO CHANGE IN ASSESSMENT ☐ CHANGE IN ASSESSMENT Current Assessment **BAA Assessment** Motor Vehicle **BAA Signatures** Mailed Date: Date/Time of Hearing: Date of BAA Decision: