

WETHERSFIELD BOARD OF ASSESSMENT APPEALS

For September MV hearing appointments, please complete and submit this application to the Assessor's Office by the end of August.

(*) fields are required by Connecticut General Statute. Type or print clearly. Incomplete applications will not be accepted.

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:
OCTOBER 1, 2019**

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 10/1/19: _____

Estimate of Value as of 10/1/19: \$ _____

(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.

X _____

*Date: _____

DO NOT WRITE BELOW THIS LINE

BOARD'S DECISION:

NO CHANGE IN ASSESSMENT

CHANGE IN ASSESSMENT

Current Assessment

BAA Assessment

Motor Vehicle

BAA Signatures

X _____

X _____

X _____

Date of BAA Decision: _____

Date/Time of Hearing: _____

Mailed Date: _____

Any changes in assessment will be effective with the Grand List of: **October 1, 2019**