The Board of Assessment Appeals requires that the property owner or legal agent complete this form. The board will review each case and the owner will be notified of the action taken.

Please provide any information, tax bills, etc. to help present your case.

PROPERTY OWNER’S NAME: _______________________________________________________

APPELLANT’S NAME: ___________________________________________________________

PROPERTY LOCATION: _________________________________________________________

MAILING ADDRESS: ___________________________________________________________

PHONE NUMBER: ______________________

If you are not the owner of the property then you must provide a notarized statement from the owner that you are authorized to represent the owner’s interest.

VEHICLE MAKE: __________________________

VEHICLE MODEL: __________________________

YEAR OF VEHICLE: __________________________

VEHICLE IDENTIFICATION NUMBER: __________________________

MILEAGE: __________________________

REASON FOR COMPLAINT (BE SPECIFIC), OWNERS STATEMENT AS TO FAIR MARKET VALUE:
_________________________________________________________________________
_________________________________________________________________________

Appeal must be presented in person (by owner or agent) to the Board of Assessment Appeals, must bring Motor Vehicle with you to the appeal.

I solemnly swear or solemnly and sincerely affirm, as the case may be, that the evidence I shall give concerning this case shall be the truth, the whole truth and nothing but the truth; so help me God or upon penalty of perjury.

* ______________________________ * ______________________________

Signature of owner or duly authorized agent Date

(Attach evidence of authorization) If disabled please contact us for necessary accommodations.

Completed forms must be returned to:
Board of Assessment Appeals
Town of Southbury
501 Main Street South
Southbury, CT 06488

Date, time, and place of hearing: __________________________

* * *

(Attach evidence of authorization)