

MOTOR VEHICLE PETITION TO THE BOARD OF ASSESSMENT APPEALS
TOWN OF ASHFORD

By the authority of Public Act 95-283, of the State of Connecticut, please print or type the following information about each property appealed.

GRAND LIST OF OCTOBER 1, 20_____

PROPERTY OWNERS NAME: _____

APPELLANT'S NAME: _____

PROPERTY DESCRIPTION

Year, Make Model: _____

VIN: _____

LIST NO. _____

REASON FOR APPEAL: _____

APPELLANT'S ESTIMATE OF VALUE: _____

EVIDENCE: (attach copies as necessary) _____

Name, address, and **PHONE NUMBER** of party to be sent correspondence:

Signature of property owner or duly authorized agent
(Attach proof of authorization)

DATE

ALL SECTIONS MUST BE COMPLETED IN ORDER TO BE GIVEN A HEARING.
FORMS ARE DUE IN THE ASSESSOR'S OFFICE BY FRIDAY, SEPTEMBER 3, 2021

Board of Assessment Appeals
Town Hall
5 Town Hall Road
Ashford, CT 06278

DATE OF HEARING: _____ TIME: _____ PLACE: _____

AGENT'S CERTIFICATION

DATE: _____

To Whom It May Concern: I, _____ being the legal owner of property located at

_____ hereby authorize _____

to act as my agent in all matters before the Board of Assessment Appeals of the Town/City of Ashford, CT for the assessment year commencing October 1, _____

(Signed) _____

**ALL SECTIONS MUST BE COMPLETED IN ORDER TO BE GIVEN A HEARING.
(CALL ASSESSORS OFFICE AT (860) 487-4403 IF FUTHER INFORMATION IS REQUIRED)**