

**Application For Motor Vehicle Property Tax Exemption Or Exemption Benefit For Connecticut Residents
On Active Military Duty Who Are Stationed Outside The State of Connecticut On The Assessment Date**

This form must be completed and returned to the assessor of the town in which the vehicle described below is subject to taxation, not later than the thirty-first day of December next following the date the property tax is due. The assessor may require you to submit information verifying a motor vehicle lease. Failure to file by the deadline constitutes a waiver of the right to claim the property tax exemption or refund under §12-81(53).

Military Information

1. On October 1, _____, (hereinafter the assessment date) I was an active duty member of the United States Armed Forces.
2. I have been an active duty Armed Forces service member since _____
(Mo/Date/Yr)
3. As a result of my official military orders, I was not in Connecticut on the assessment date. Yes No
4. On that date, I was attached to the following duty station, where my vehicle was garaged: _____
5. Permanent address on assessment date: _____

Number & Street	City or Town	State & Zip Code
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Vehicle Information

6. Vehicle Registration (Plate) Number: _____ Make, Model and Year: _____
7. On the assessment date, this vehicle was Owned Leased by me. (For leased vehicle, complete 8, 9 and 10.)
8. Leased From: _____ To: _____ Lessor: _____

(Mo/Date/Yr)	(Mo/Date/Yr)	(Name of vehicle owner as it appears on lease)
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9. Lessor Address: _____

Number & Street or PO Box	City or Town	State & Zip Code
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10. Refund should be sent to me at: _____

Number & Street or PO Box	City or Town	State & Zip Code
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Attestation Statement

I hereby claim a motor vehicle property tax exemption or tax refund for a leased vehicle, pursuant to CGS §12-81(53). All information herein provided is true and accurate to the best of my knowledge and belief.

Name of Active Duty Service Member (please print) _____

Signature of Active Duty Service Member _____

Date Signed _____

Signature of Commanding Officer _____

For Municipal Use Only

Regular Grand List Supplemental Grand List Vehicle Assessment: \$ _____

Exemption for vehicle owned by active duty service member Approved Denied

Reason for denial: _____

Signature of Assessor _____

Date Signed _____

Vehicle leased by active duty service member - Assessor's calculation of refund amount(s)

Town Lesser Taxing District

District Name _____

Assessment X Town Mill Rate: \$ _____
Town Refund Amount

Assessment X District Mill Rate: \$ _____
District Refund Amount

Refund Approved Denied Reason for denial: _____

Signature of Assessor and Date Signed
Certification of refund amount(s)

Signature of Tax Collector/District Clerk and Date Signed
Certification that vehicle tax has been paid