

**APPLICATION for APPEAL – BOARD of ASSESSMENT APPEALS
MOTOR VEHICLE SESSION
Town of Thomaston, CT**

Pursuant to §12-111 of the State of Connecticut General Statutes, application to appeal an assessment

SEPTEMBER 12, 2020
9AM TO 11 PM FIRST COME FIRST SERVED
LENA MORTON GALLERY

The Board of Assessment Appeals requires :

- The Property Owner or Legal Agent, only, completes this Application.
- Supplemental information to present your case (tax bills, assessments, etc.), is attached.

Property Owner Name(s)
Mailing Address
City/State/Zip
Phone Cell

Appellant Name (if not Owner)
Address
City/State/Zip
Phone Cell
(If you are not the Owner, attach a notarized statement from the Owner that you are authorized to represent Owner's interest.)

Correspondence & Contact:
Name
Address
City/State/Zip
Phone Cell

Motor Vehicle: Year _____ Make: _____ Model _____ Plate # _____

VIN # _____

Owner/Appellant Statement of Fair Market Value: \$ _____

Reason for Appeal: (Attach supplemental information. Please BE SPECIFIC.)

X _____
(Signature of Owner or Duly Authorized Agent)

Date _____

