

**PETITION TO THE  
BOARD OF ASSESSMENT APPEALS  
2019 GL  
TOWN OF NORTH BRANFORD, CONNECTICUT**

**Must be filed by February 20<sup>th</sup> 2020**

By authority of Public Act 95-283, of the State of Connecticut

Please print or type the following information in **Section A** regarding each property being appealed.

\*\*\*\*\*

SECTION A - APPEAL APPLICATION

Property Owner(s): \_\_\_\_\_

Name of signer of Application: \_\_\_\_\_

Position of Signer:                      Owner  Agent  Corporation Officer  (Identify):

Property owner will be represented by:    Self  Agent

**(If by agent, owner must complete attached authorization form)**

Name of person, mailing address and phone number to which all notices and correspondence should be sent  
(List one address only):

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Location and type of property being appealed:** \_\_\_\_\_

- Real Estate – residential, commercial, industrial – include location
- Personal Property – name of company, owner of business and location
- Motor Vehicle – year/make/model/marker number)

**Tax Map and Lot**    \_\_\_\_\_ / \_\_\_\_\_                      **List #**    \_\_\_\_\_

Reason for the appeal: \_\_\_\_\_

Appellant's estimate of value: \_\_\_\_\_

(attach documentation of value)

\_\_\_\_\_  
**Signature of property owner or duly authorized agent**  
(attach evidence of authorization)

\_\_\_\_\_  
**Date**

**SECTION (B) - NOTICE OF APPEAL HEARING DATE, TIME AND PLACE**

(For Board of Assessment Appeals use only)

- Your appeal hearing for the above property is scheduled to be held at the North Branford Town Hall, (Assessor's Office) 909 Foxon Road,

North Branford, CT on this day of \_\_\_\_\_ MARCH \_\_\_\_\_ 2020, at \_\_\_\_\_ PM

**BOARD OF ASSESSMENT APPEALS AUTHORIZATION**

To the Board of Assessment Appeals of the Town of North Branford:

I/We, \_\_\_\_\_

being legal owner(s) of \_\_\_\_\_

hereby authorize \_\_\_\_\_

to act as my agent in all matters before the Board of Assessment Appeals of the Town of North Branford.

Property Owner(s) Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Owner(s) Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_