

**PETITION TO THE
BOARD OF ASSESSMENT APPEALS
2018 GL
TOWN OF NORTH BRANFORD, CONNECTICUT**

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.

GRAND LIST OF OCTOBER 1, 2018

APPEAL APPLICATION

Property Owner(s) _____

Name of signer of Application: _____

Position of signer: Owner: _____ Agent: _____ Corporation Officer: _____ Other: _____ 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: _____

City, State, Zip Code _____

Phone Number: _____

Motor Vehicle Assessor's List Number: _____

Motor Vehicle Make: _____

Motor Vehicle Model: _____

Motor Vehicle Plate Number: _____

Motor Vehicle VIN: _____

Reason for Appeal: (Type below)

Appellant's estimate of value: \$ _____

Signature of property owner or duly authorized agent

Date

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.

Signature of property owner or duly authorized agent

Date