

Town of Farmington

Assessment Appeal (Must be filed on or before March 20th .2017)

Send applications to: BOARD OF ASSESSMENT APPEALS

1 Monteith Dr., Farmington, CT 06032-1053

Property Owner(s) _____

Telephone () _____

Name of Signer (If applicable) _____

Telephone () _____

Position of the Signer (If applicable) _____

Property owner will be represented by: self _____ agent _____

(If by agent, must complete authorization form on 2nd side)

Name of Person and Address to which all notices and correspondence should be sent
(list one address only):

Name _____

Street _____

City, State, Zip Code _____

Description of the property being appealed (location if real estate,
year/make/model/marker number if motor vehicle)

ASSESSMENT ACCOUNT NUMBER : _____

For the G.L. of Oct. 1, 20____. Real Estate __ Motor Vehicle __ Personal Property __

Reason for the Appeal:

**(THE SINGLE FACT THAT YOUR TAXES OR VALUE INCREASED WILL NOT
SUPPORT THIS APPEAL & WILL RESULT IN DENIAL OF THE APPEAL)**

Appellant's estimate of the value of the property being appealed: _____

Signature of owner or agent: _____

Date appeal signed: _____

(Agent may sign, if authorization form completed on back)

**PLEASE NOTE THAT THE ABOVE FORM MUST BE COMPLETED IN ITS ENTIRETY.
PROPERTY OWNERS OWNING MORE THAN ONE PROPERTY OR VEHICLE MUST
FILE A SEPARATE FORM FOR EACH ACCOUNT APPEALED. PLEASE TYPE OR
PRINT LEGIBLY.**

NOTICE OF APPEAL HEARING DATE, TIME AND PLACE

An appeal hearing is to be held at the Farmington Town Hall on _____ at _____

for _____ belonging to _____

Board of Assessment Appeals Authorization _____ (dated) _____

TO THE BOARD OF ASSESSMENT APPEALS OF THE TOWN OF FARMINGTON:

I, _____ being the legal owner of said property,
_____ hereby authorize
_____ to act as my agent in all matters before the Board of
Assessment Appeals of the Town of Farmington.

Property Owner: _____ (signature)

Owners Address:

Section 12-111 of the General Statutes of the State of Connecticut as amended by P.A. 95-283 Any person, including any lessee of real property whose lease has been recorded as provided in section 47-19 and who is bound under the terms of his lease to pay property taxes and any person to whom title to such property has been transferred since the assessment date, claiming to be aggrieved by the doings of the assessors of such town may appeal there from to such board of assessment appeals. Such appeal shall be filed, in writing, on or before February twentieth. The written appeal shall include, but is not limited to, the property owner's name, name and position of the signer, description of the property which is the subject of the appeal, name and mailing address of the party to be sent all correspondence by the board of assessment appeals, reason for the appeal, appellants estimate of value, signature of the property owner, or duly authorized agent of the property owner, and date of signature. The board shall notify each aggrieved taxpayer who filed a written appeal in the proper form and in a timely manner, no later than March first immediately following the assessment date, of the date, time and place of the appeal hearing. Such notice shall be sent no later than seven calendar days preceding the hearing date except that the board may elect not to conduct an appeal hearing for any commercial, industrial, utility or apartment property with an assessed value greater than one million dollars. The board shall, not later than March first, notify the appellant that the board has elected not to conduct an appeal hearing.....Pursuant to CT Statutes Sec.12-117a, **Any person claiming to be aggrieved by the action of the Board, may within two months of the date, of the mailing of the decision, appeal to the superior court.**

DO NOT WRITE BELOW - FOR BOARD OF ASSESSMENT APPEALS USE ONLY

This appeal was heard at a meeting of the Board of Assessment Appeals held on the _____ day of March, 20___. It was voted as follows at a meeting held on the _____ day of March, 20__.

HEARING RESULTS <input type="checkbox"/> Petition dismissed <input type="checkbox"/> Petition denied <input type="checkbox"/> Petition granted as follows:	ASSESSMENT ACCOUNT NUMBER: _____ For the Grand List of October 1, 20__ Real Estate ___ Motor Vehicle ___ Personal Property ___ Owner's Names _____ Property Description _____
\$ _____ - \$ _____ = \$ _____ current assessment reduction new assessment	_____ Chairman, BAA