



PETITION TO THE BOARD OF ASSESSMENT APPEALS TOWN OF CROMWELL, CONNECTICUT

GRAND LIST OF OCTOBER 1, 2015

In order to be given a hearing this form must be **completed**, **signed** and **received** by February 19, 2016.

Property Owner's Name: _____

Property Location: _____

Property Description: _____

Account #: _____ Appellant's Estimate of **MARKET** Value: _____

Property Type (Check): Residential Commercial Vacant Land Personal Property Motor Vehicle

Reason for Appeal: _____

Did you meet or speak with the Assessor's office to discuss your assessment? What was the result of the meeting(s) and/or discussion(s)?

Correspondence should be sent to the following:

Name: _____ Phone Number: _____

Address: _____

You must bring a copy of your current assessment (field card, bill and/or assessment notice) and copies of any information to justify your appeal; this information will become part of your appeal file maintained in the Assessor's Office. If supporting documentation is not provided, the petition may be denied. By signing this petition, you acknowledge that you or duly authorized agent understands the requirements and that the form is complete.

Signature of property owner or duly authorized agent Date

Completed forms must be received by February 19th, 2016. The form(s) can be hand delivered to the Assessor's office or mailed to:

Board of Assessment Appeals
Town of Cromwell
41 West Street
Cromwell, CT 06416

(If you would like someone to represent you at the hearing, please complete this affidavit)

To Whom It May Concern:

I, _____ being the legal owner of property located at _____
_____ hereby authorize _____

to act as my agent on all matters before the Cromwell Board of Assessment Appeals for the assessment year commencing October 1, 2015

(Signed) _____ (Date) _____

(Subscribed and Sworn before me) _____ My commission expires _____