



## TOWN OF SUFFIELD

Town Hall, 83 Mountain Road, Suffield, Connecticut 06078

### OFFICE OF THE ASSESSOR

Office (860) 668-3866

Fax (860) 668-3315

### **BOARD OF ASSESSMENT APPEALS APPLICATIONS**

Please complete the application and return it to the Assessor. Applications for the upcoming Real Estate, Personal Property of businesses or Motor Vehicle bills must be received by **February 20**, per Connecticut law; **no** applications will be accepted after this date. You need to file **one** application for **each** property account being appealed.

Applications for the September **Motor Vehicle** Board Hearings, after motor vehicle bills have been sent, must be returned prior to the hearing dates.

A notice will be sent to you no later than MARCH 1, indicating the date and time of your appointment. Hearings will be held in Town Hall during the month of March.

**Appointments will not be changed from those assigned by the Board.** We will make every attempt to satisfy your time requested on the application.

You or your agent must appear before the Board of Assessment Appeal for your appeal to be considered. Your agent must present written proof of authority.

For real estate appeals, you may present documentation to the Board that shows that your property is over-valued or is valued inequitably when compared to similar properties based on the 2013 revaluation. You cannot base your appeal solely on the fact that you feel your taxes are too high, or that they may increase.

The results of your hearing will be returned to you **after** the Board deliberates your appeal, indicating the results of their deliberations.

Please contact this office at (860) 668-3866 if you have any questions.

Assessor's Office  
Town of Suffield

**PETITION TO THE**  
**BOARD OF ASSESSMENT APPEALS**  
**TOWN OF SUFFIELD**

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

Please print or type the following information about each property appealed.

GRAND LIST OF OCTOBER 1, 20\_\_\_\_\_

PROPERTY OWNERS NAME: \_\_\_\_\_

APPELLANT'S NAME: \_\_\_\_\_

ACCOUNT# \_\_\_\_\_ LIST # \_\_\_\_\_

PROPERTY TYPE: REAL ESTATE \_\_\_\_

Property

Location: \_\_\_\_\_ MAP/BLOCK/LOT: \_\_\_\_\_

MOTOR VEHICLE \_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ List # \_\_\_\_\_

PERSONAL PROPERTY \_\_\_\_

List # \_\_\_\_\_

REASON FOR

APPEAL: \_\_\_\_\_

\_\_\_\_\_

APPELLANT'S ESTIMATE OF VALUE: \_\_\_\_\_

\_\_\_\_\_

Name, address, and phone number of party to be sent correspondence:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of owner or agent  
(Attach proof of authorization)

\_\_\_\_\_  
Date

ALL SECTIONS MUST BE COMPLETED

THIS FORM MUST **BE FILED BY FEBRUARY 20<sup>TH</sup>** AND RETURNED TO:

Board of Assessment Appeals  
83 Mountain Rd.  
Suffield CT 06078

**AGENT'S CERTIFICATION**  
**[Bring signed to hearing]**

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DATE: \_\_\_\_\_

To Whom It May Concern: I, \_\_\_\_\_ being the legal owner of  
property

located at \_\_\_\_\_

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

to act as my agent in all matters before the Board of Assessment Appeals

of the Town/City of \_\_\_\_\_

for the assessment year commencing October 1, 20\_\_\_\_

(Signed)

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**SEPTEMBER MOTOR VEHICLE**  
**PETITION TO THE**  
**BOARD OF ASSESSMENT APPEALS**  
**TOWN OF SUFFIELD**

Please print or type the following information about each vehicle appealed.

GRAND LIST OF OCTOBER 1, 20\_\_\_\_\_

OWNERS NAME: \_\_\_\_\_

APPELLANT'S NAME: \_\_\_\_\_  
(if different)

Year\_\_\_\_\_Make \_\_\_\_\_ Model \_\_\_\_\_ LIST #\_\_\_\_\_

REASON FOR  
APPEAL: \_\_\_\_\_

APPELLANT'S ESTIMATE OF VALUE: \_\_\_\_\_

Name, address, and phone number of party to be sent correspondence:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of owner or agent  
(Attach proof of authorization)

\_\_\_\_\_  
Date

**ALL SECTIONS MUST BE COMPLETED**

**THIS FORM MUST BE RETURNED TO:**  
Board of Assessment Appeals  
c/o Assessor's Office  
83 Mountain Rd.  
Suffield CT 06078