

## TOWN OF KILLINGLY

## Killingly Board of Assessment Appeals Request to Appeal Assessment

Pursuant to CGS §12-111, of the State of Connecticut, an application to appeal an assessment must be filed: **on or before February 20 following the assessment (grand list) date**. **The** *ITALIC* **print sections must be completed.** The Board of Assessment Appeals does not have to give a hearing date to incomplete applications. Please print or type.

| Property Owner:  | Grand List of: October 1, 2023 List #:   |   |
|--|--|---|
| NAME   | I  | PROPERTY DESCRIPTION:                     |
| Address  | TYPE:  | Residential                               |
| City/State/Zip   | Check one  | Commercial/Industrial                     |
| Appellant: if other than record owner  |  | Vacant Land                               |
| NAME   |  | Motor Vehicle: Supple 2022                |
| Address  |  | Motor Vehicle: Regular 2023               |
| City/State/Zip   |  | Personal Property:                        |
| Correspondence & Contact if different from owner above   | LOCATION AND DI  | ESCRIPTION:                               |
| NAME   |  |   |
| ADDRESS  | NUMBER AND STRE  | TET - if real estate                      |
| City/State/Zip   | Pangana I Propan   | ety: If a motor vehicle Year/Make/Model   |
| Phone Number   |  |   |
| Reason for Appeal:   | Appellant's es   | stimate of value:                         |
|  | attach documentation of value  |   |
|  |  |   |
| X Signature of property owner or duly authorized agent (attach evidence of a                             | uthorization)  | <br>Date                                  |
|  | ,  | to: Killingly Board of Assessment Appeals |
| Applications must be received by the Killingly Board of Ass  |  | 172 Main Street                           |
| FEBRUARY 20, 2024 in the Killingly Asses   | ssor's Office:   | Killingly, C1 00239                       |
|  | ) ma i mai i m |   |
| The Board of Assessment Appeals has scheduled a hearing  | _  |   |
| Place:   | Killingly Town Hall, 172 Main Street, Killingly, CT  |   |
| Day and Date:  | Time:  |   |
| You or your designated agent MUST appear at this he reduce the list of anyone who does not appear before |  |   |
| letter signed by you stating that they may act on your be  |  |   |
| Board of Assessment Appeals Comments and Summary:  |  | _   |
| 2023 Grand List Assessment/2022 MVS  | Board of Asses   | sment Appeals Assessment                  |
| Board of Assessment Appeals: (signatures)  |  | _   |
|  |  |   |
|  |  |   |