TOWN OF WATERTOWN, CONNECTICUT

Town Hall, 37 DeForest Street
Watertown, Connecticut 06795-2200

Office of the Assessor, (860) 945-5235 FAX (860) 945-4741
Carolyn Nadeau, CCMA II

- PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE YOUR HEARING

- Those who are appealing Supplemental Motor Vehicle values **must either bring the vehicle if possible, or bring pictures of the vehicle if it is inoperable.** If your vehicle is more than 20 years old and you do not feel that it should be considered "classic or collectible", you may wish to consider re-registering it with Early American plates. If it qualifies for this type of plate, the assessment is fixed at 500.
- Please remember that the Board has the statutory authority to ***increase* or *decrease*** values.

- If you do not plan to attend the hearing yourself, you may designate someone to act on your behalf, but you must give them written permission. The hearing must be denied if this written statement is not presented.

ON THE EVENING OF YOUR HEARING:

- Please sign in, and wait for your name to be called.
- A Board of Assessment Appeals member will hear your appeal and will take your appraisal, or whatever documentation you may have.
- You will be notified of the results of the hearing within ten days.
- If the B.A.A. reduces the value of your vehicle, and you have already paid the bill, you will receive a "Request for Refund" in the mail from the Tax Collector. Please sign it and return it to the Tax Collector's Office.
- You will receive your refund in approximately 6 weeks.
- Please note that reductions made to Motor Vehicles will *not* be carried over to any other tax year. You must appeal the value annually.

PETITION TO THE BOARD OF ASSESSMENT APPEALS
TOWN OF WATERTOWN

SUPPLEMENTAL MOTOR VEHICLE

MUST BE FILED IN THE ASSESSOR'S OFFICE BY FEBRUARY 20, 2015

By the authority of Connecticut General Statute 12-111

Please print or type all of the information below

GRAND LIST OF OCTOBER 1, 2013

Property Owner's Name: _____

Property Address: _____

Phone Number: HOME:_____CELL:_____

TOWN'S CURRENT ASSESSMENT: _____

APPELLANTS ESTIMATE OF VALUE: _____

YR:_____ MAKE:_____MODEL:_____VIN:_____

Reason for Appeal:_____

The undersigned agrees to appear before the Board of Assessment Appeals and answer, under oath, all further questions pertaining to the property referenced above. Date and Time of the appointment will be provided to the property owner by March 1, 2015.

Signature of Property Owner of Duly Authorized Agent:_____

Name and position of signer:_____(Attach proof of authorization)

Mailing Address:_____(To which all notices should be sent)

Date: _____,2015

THIS FORM MUST BE COMPLETED ENTIRELY AND RECEIVED IN THE ASSESSORS'S OFFICE BY FEBRUARY 20, 2015 5pm IN ORDER TO BE GIVEN A HEARING DATE.
No fax or scanned copies may be accepted. No postmarked envelopes can be accepted.

COMPLETED FORMS MUST BE RETURNED TO:
BOARD OF ASSESSMENT APPEALS, TOWN OF WATERTOWN
37 DEFOREST ST, WATERTOWN, CT 06795
860-945-5235

DATE & TIME OF HEARING:_____