

APPEALING YOUR ASSESSMENT

What You Need To Know

1. File an application to appeal **on or before February 20, 2011**. Appeal forms are available at the Assessor's Office.
2. Complete the appeal form in its entirety. An incomplete application may prevent you from receiving a hearing with the board.
3. Appear before the Board of Assessment Appeals at your designated time.

Pursuant to C. G. § 12-111, property owners wishing to appeal their assessment before the Board of Assessment Appeals must submit a written application to the board **on or before February 20, 2011**. The board will determine the meeting dates for appeals, and contact appellants to schedule hearing dates and times. The board will mail written notices to each appellant of their specific meeting place, date and time. The notice of hearing will be mailed no later than April 1, and at least seven calendar days prior the hearing date.

A WRITTEN APPLICATION TO APPEAL

A written application to appeal an assessment is required. This application may be mailed, hand delivered to the Assessor's Office, or faxed with the original following by mail. Only those submitting an application will be given a hearing date. A separate application must be filed for each property.

INFORMATION THAT MUST BE COMPLETED ON THE APPLICATION TO APPEAL

C.G. § 12-111 requires that the application must contain the following information and items:

Property owner's name

Name and position of the person signing the appeal application

Property location and pin number

Name and address of the person to whom correspondence is to be sent

Reason for the appeal

Appellant's estimate of value

Signature of the property owner or that of his/her duly authorized agent (attach authorization)

Date the appeal application is signed

Failure to complete the appeal application in its entirety may prevent an appeal with the board. Fill in each item when information is requested. If you have any questions about the form or require further information, please contact the Assessor's Office at (860) 441-6660. Office hours are Monday through Friday, 8:30 a.m. to 4:40 p.m.

**TOWN OF GROTON
BOARD OF ASSESSMENT APPEALS**

Pursuant to C.G. §12-111 of the State of Connecticut, an application to appeal an assessment must be filed:

On or before February 20, 2011.

Complete form through Signature Line. The Board of Assessment Appeals does not have to grant a hearing date to incomplete applications. Please print clearly or type appeal form.

Applications should be sent to:

Board of Assessment Appeals
Town of Groton
45 Fort Hill Rd
Groton, CT 06340

Application to Appeal

Grand List of October 1, 2010

Property Owner:

Name: _____

***Appellant/Agent:**

Name: _____

Correspondence & Contact

Name: _____

Address: _____

City/St/Zip: _____

Phone: _____

Reason for Appeal:

Property Description:

& Street: _____

**Pin No: _____

Property type: ___Residential ___ Commercial
___ Motor Vehicle ___ Personal Property

Appellant's estimate of value:

_____ (attach documentation of value if applicable)

Signature of Property Owner or duly authorized agent (attach evidence of authorization)

Date

X _____

DO NOT WRITE BELOW THIS LINE

Date

Time

Place

Board of Assessment Appeals has scheduled an appointment for this appeal as follows: _____

Board's Decision:

___ No Change in Assessment

___ Change in Assessment

Category

Current Assessment

BAA Assessment

Land	_____	_____
Buildings	_____	_____
Miscellaneous	_____	_____
Total	_____	_____
Motor Vehicle	_____	_____
Personal Property	_____	_____

Board of Assessment Appeals Signatures

X _____ X _____

X _____ Date of BAA's Decision _____

Mailed Date _____

Any change will be effective with the October 1, 2010 Grand List

In most cases an appeal can be made to Superior Court within 60 days of mailed date below.

*Appellant/Agent refers to the person that is appealing, usually the owner, or an agent to represent the owner, such as an attorney.

**Pin No. refers to the parcel ID number or unique ID number as listed on your assessment notice.

TOWN OF GROTON
BOARD OF ASSESSMENT APPEALS

Property Owner: _____
Address: _____

Date: _____
Time: _____
BAA Member:

RE _____ PP _____ MV _____

Property Location: _____
Business Name: _____
Attachments? _____

Appellants Comments:

Boards Recommended Action:

Date of Deliberation: _____

BAA Members Vote To:

AGREE W/ACTION

CS _____
JP _____
JM _____

DISAGREE W/ACTION

CS _____
JP _____
JM _____

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