

# Branford Board of Assessment Appeals

Pursuant to P.A. 95-283, of the State of Connecticut, an application

to appeal an assessment must be filed: **on or Before September 2, 2022**

**The Office is CLOSED at 4:30 pm.**

Applications may be sent to:  
Board of Assessment Appeals  
c/o Assessor's Office  
1019 Main Street  
Branford, CT 06405

**Property Owner**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_

Grand List of:  List #

Property Description:  
Make \_\_\_\_\_  
Model \_\_\_\_\_  
Year \_\_\_\_\_  
Mileage on 10/1/2021 \_\_\_\_\_

**Mailing Address & Contact Person**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Ph #(s) \_\_\_\_\_  
E-mail \_\_\_\_\_

**Reason for Appeal:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Appellant's Estimate of Value (Assessment):

\_\_\_\_\_  
Signature of property owner or duly authorized agent (attach evidence of authorization)

**\*\*ALL HEARINGS WILL TAKE PLACE WEDNESDAY, SEPTEMBER 7, 2022 commencing at 5:15 pm  
on a First Come, First Serve basis at THE ASSESSOR'S OFFICE  
BRANFORD TOWN HALL, 1019 MAIN STREET, BRANFORD, CONNECTICUT\*\***

DO NOT WRITE BELOW THIS LINE

HEARING DATE:  HEARING TIME:

X \_\_\_\_\_ DATE \_\_\_\_\_

OLD ASSESSMENT

NEW ASSESSMENT

CHANGE

NO CHANGE

**Board of Assessment Appeals Signatures:**

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

## **BOARD OF ASSESSMENT APPEALS GUIDELINES**

1. The legal owner of the vehicle must appear with the vehicle or the person representing the owner **MUST** have submitted an Agent Authorization Letter allowing them to appear on behalf of the owner.
2. Complete form but **“DO NOT SIGN”**.
3. **RETURN FORM BY SEPTEMBER 2, 2022.**
4. **Your Application must include all items to substantiate your request for a reduction.**
  - i) Submitted documentation should be copies, as they will remain the property of the Board of Assessment Appeals.
  - ii) Photographs that are submitted are not returned.
5. **BE AWARE THAT, AS WITH ALL PUBLIC HEARINGS IN BRANFORD, THE HEARING WILL BE RECORDED.**
6. **Hearings will be conducted on a First Come First Serve Basis.** There are no appointments.
7. After your hearing, your hearing officer will present your case to the entire board for consideration and a decision.
8. You will be notified in writing of the Board’s final decision regarding your appeal.
9. A valid telephone number and email are **REQUIRED**.

## AGENT'S CERTIFICATION

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

To whom it may concern:

I, \_\_\_\_\_ being the legal owner of property  
identified as \_\_\_\_\_ hereby authorize  
\_\_\_\_\_ to act as my agent in all matters before the Board of  
Assessment Appeals of the Town of Branford for the assessment year commencing October 1,  
2021.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Telephone \_\_\_\_\_