

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

MOTOR VEHICLE APPEAL

Pursuant to Connecticut General Statute 12-110 The Board of Assessment Appeals shall meet at least once in the Month of September for the sole purpose of hearing appeals related to the assessment of Motor Vehicles

GRAND LIST OF OCTOBER 1st: _____ **BILL#:** _____

VEHICLE OWNERS NAME: _____

MAILING ADDRESS: _____

PHONE: _____ **EMAIL:** _____

YEAR: _____ **MAKE:** _____ **MODEL:** _____

PLATE#: _____ **VIN#:** _____ **MILAGE:** _____

ASSESSED VALUE: _____

REASON FOR APPEAL (ie: mileage/condition): _____

SIGNATURE OF APPELLANT: _____ **DATE:** _____

The undersigned agrees to appear before the Board of Assessment Appeals and answer, under oath, all further questions about the above property.

DATE & TIME OF HEARING: _____

**WATERTOWN MUNICIPAL CENTER
61 ECHO LAKE RD
WATERTOWN, CT 06795 (860) 945-5235**

BAA DECISION: NO REDUCTION: _____ **REDUCED ASSESSMENT:** \$ _____

NO SHOW: _____ **INCREASED ASSESSMENT:** \$ _____

BAA MEMBER SIGNATURES:

