



PETITION TO THE BOARD OF ASSESSMENT APPEALS

TOWN OF NAUGATUCK, CONNECTICUT

Per State of Connecticut General Statute § 12-111

Please print or type the following information about each property appealed

Grand list of October 1, 2020

Property Owner's Name(s): \_\_\_\_\_

Owner's phone number \_\_\_\_\_

Appellant (Agent)' Name: \_\_\_\_\_

Property Location: \_\_\_\_\_

Number and Street (unit number if applicable)

Type of Property: \_\_\_ Real Estate \_\_\_ Personal Property \_\_\_ Motor Vehicle

Reason for Appeal: \_\_\_\_\_

\_\_\_\_\_

Appellant's Estimate of Appraised Value (100%): \_\_\_\_\_

Estimate of Assessed Value (70%) of above: \_\_\_\_\_

(Real estate values must be as of October 1, 2018- attach documentation, if applicable)

Name, Mailing Address of Party for Correspondence:

\_\_\_\_\_

Signature of property owner or authorized agent

\_\_\_\_\_

Date

(Attach Agent Notarized Authorization Form)

**THIS FORM MUST BE COMPLETED AND RECEIVED PHYSICALLY IN THE ASSESSOR'S OFFICE**

**BEFORE FEBRUARY 20, 2021. (Saturday)**

**IF ALL INFORMATION IS NOT PROVIDED, THIS PETITION WILL BE CONSIDERED INCOMPLETE AND WILL  
BE DISQUALIFIED.**

RETURN TO: [Assessor@naugatuck-ct.gov](mailto:Assessor@naugatuck-ct.gov)

(If mailed the application must be received here before Feb 20 the stamp date does not count).

**Mail to**

BOARD OF ASSESSMENT APPEALS

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

229 Church St

TIME: \_\_\_\_\_

Naugatuck, CT 06770

For Board Use Only:

## Action Notice of the Board of Assessment Appeals

Name: \_\_\_\_\_ Property Address: \_\_\_\_\_

(Property Owner's Name)

Dear Petitioner:

The Board of Assessment Appeals has carefully reviewed all information pertaining to your real estate assessment. Below is the determination of the board:

For Grand List of 2018

Your appeal was granted on: \_\_\_\_\_ (action date)

Your appeal was denied on: \_\_\_\_\_ (action date)

	<u>Old Assessment</u>	<u>New Assessment</u>
Land	_____	_____
Building	_____	_____
Out Buildings	_____	_____
Other (MV)	_____	_____
Total	_____	_____

_____	Granted	Denied	Abstained
(Chair)			

_____	Granted	Denied	Abstained
(Member)			

_____	Granted	Denied	Abstained
(Member)			

Appeals from the action of the Board of Assessment Appeals must be filed with the Superior Court within two (2) months from the date of the mailing of this notice of the Board's action.

Respectfully,

Board of Assessment Appeals