PETITION TO THE BOARD OF ASSESSMENT APPEALS

TOWN OF CORNWALL, CT

*Must be completed and received by Town Clerk by* February 20, 2024

*(By authority of Public Act 95-283, of the State of Connecticut)*

Print or type the following information about the property being appealed. Please complete a separate application for each property you wish to appeal. Every item MUST be completed to be given a hearing and applicant or agent must appear in person at scheduled hearing.

GRAND LIST OF OCTOBER 1, 2023

Property owner’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Property location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Number & Street)

Reason for appeal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Appellant’s estimate of value: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Attach documentation of value)

**Mailing address,** ***EMAIL* & phone number** of property owners:

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

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

Would you allow BAA to do an interior inspection of your home: Yes\_\_\_\_\_\_ No\_\_\_\_\_\_

In-person hearing: \_\_\_\_\_\_\_\_\_\_\_\_ Virtual: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

Signature of all property owners or duly Date

authorized agent (attach evidence of

authorization)

*Completed forms should be returned to:* Board of Assessment Appeals

 C/o Town Clerk

 Town of Cornwall

 P.O. Box 97

 Cornwall, CT 06753

To be filled out by the BAA and returned to the applicant:

Your hearing is scheduled at Town Hall as follows: date \_\_\_\_\_\_\_\_\_\_ time \_\_\_\_\_\_\_\_