

**Application for Assessment Appeal**

Board of Assessment Appeals  
Town of Stafford, Connecticut

Application must be received in the Assessor’s Office by February 20, 2024

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

Property Owner will be represented by: Self\_\_\_\_ Agent\_\_\_\_ (If by agent, the Agent’s certification section must be completed)

Name: \_\_\_\_\_

Street, City, State, Zip Code: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

**For the Grand List of October 1, 2020:**

Real Estate: \_\_\_\_\_ Supplemental Motor Vehicle: \_\_\_\_\_ Personal Property: \_\_\_\_\_

Description of the property being appealed:

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

Reason for Appeal:

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

Appellant’s estimate value of property being appealed **must be supplied or the appeal will not be accepted** (attach any documents supporting estimate): \_\_\_\_\_

Signature of Owner or Agent: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Dated: \_\_\_\_\_

**Agents Certification**

To Whom It May Concern: I, \_\_\_\_\_ being the legal owner of property located at: \_\_\_\_\_

Hereby authorize \_\_\_\_\_ to act as my agent in all matters before the Board of Assessment Appeals of the Town of Stafford, Connecticut for the Assessment year commencing October 1, 2023.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

**APPLICATION MUST BE RECEIVED IN THE ASSESSOR’S OFFICE BY FEBRUARY 20, 2024**