

**OWNER OR AUTHORIZED AGENT MUST APPEAR IN PERSON AT THE ABOVE HEARING**  
**\*\*MOTOR VEHICLE TAX MUST BE PAID ON TIME EVEN IF APPEALING ASSESSMENT\*\***

PETITION TO THE BOARD OF ASSESSMENT APPEALS  
SIMSBURY, CONNECTICUT

By authority of Public Act 95-283, of the State of Connecticut  
Please print or type the following information about each property appealed

GRAND LIST OF OCTOBER 1, 2010

\*Property Owner's Name: \_\_\_\_\_

\*Appellant's Name: \_\_\_\_\_

\*Owner's Address: \_\_\_\_\_  
number and street

\*Vehicle Description: \_\_\_\_\_  
make, model, year of motor vehicle

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

\*Appellant's Estimate of Value: \_\_\_\_\_  
attach documentation of value, if applicable

\*Name, mailing address, and phone number of party to be sent correspondence:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* \_\_\_\_\_ \*Date: \_\_\_\_\_  
Signature of property owner or duly authorized agent  
(attach proof of authorization)

**SECTIONS ABOVE WITH AN \* MUST BE COMPLETED IN ORDER TO BE GIVEN A HEARING**

RETURN TO:

Board of Assessment Appeals  
Town of Simsbury  
933 Hopmeadow Street  
P. O. Box 495  
Simsbury, CT 06070

Date, time, and place of hearing: **Wednesday, September 14, 2011 at: \_\_\_\_\_ PM**

Appeal Number: \_\_\_\_\_

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