

**PETITION TO THE BOARD OF ASSESSMENT APPEALS  
TOWN OF SEYMOUR, 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, 2024

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

Appellant's 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, 2024 – attach documentation, if applicable)

Name, Mailing Address and Phone Number of Party to be sent Correspondence:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of property owner or authorized agent  
(attach written evidence of authorization)

\_\_\_\_\_  
Date

**THIS FORM MUST BE COMPLETED AND RECEIVED PHYSICALLY IN THE ASSESSOR'S  
OFFICE BY FEBRUARY 20, 2025.**

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

RETURN TO:  
BOARD OF ASSESSMENT APPEALS  
C/O ASSESSOR'S OFFICE  
1 FIRST STREET  
SEYMOUR, CT 06483

FOR OFFICE USE ONLY:  
DATE: \_\_\_\_\_  
TIME: \_\_\_\_\_