

Tolland Board of Assessment Appeals

Pursuant to P.A.95-283, of the State of Connecticut, an application to appeal an assessment must be filed: on or before _____

Applications may be sent to:

Tolland Board of Assessment Appeals
21 Tolland Green
Tolland, CT 06084

Highlighted sections must be completed. The Board of Assessment Appeals does not have to give a hearing date to incomplete applications. Please print or type.

Application to Appeal

Property Owner:		Grand List of:	List No.:
Name			
Address			
City/State/Zip	No. & Street	Property Description:	
	Map/Block/Lot	(if available)	
Appellant:		Property Type	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Personal Property
Name			
Address			
City/State/Zip			
Correspondence & Contact:		Reason for appeal:	
Name			
Address			
City/State/Zip			
Phone No.	<i>(attach documentation of value, if applicable)</i>		
<i>Signature of Property Owner or duly authorized agent (attach evidence of authorization)</i>		<i>Date</i>	
X			

Board of Assessment Appeals has:	Date	Time	Place
scheduled an appointment as follows			

Appeal Summary

Assessments	Grand List	Board of Assessment Appeals
Land	_____	_____
Building	_____	_____
Miscellaneous	_____	_____
Total	_____	_____
Motor Vehicle	_____	_____
Personal Property	_____	_____
Board of Assessment Appeals: (signatures)		
X		X
X		Date of Board's Decision: _____