

**PETITION TO THE
BOARD OF ASSESSMENT APPEALS
Town of New Milford, CT**

Must be filed by February 17, 2023

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, 2022

LIST # _____

***Property Owner's Name:** _____

***Appellants Name:** _____

***Property Address:** _____

***Property Type:** _____

(Residential, Commercial, Industrial, Personal Property, Motor Vehicle - Supplemental)

***Reason for Appeal:**

***Appellant's Estimate of Value:** _____

Name: _____

Mailing Address: _____

Telephone: _____

Email: _____

*

Signature of property owner or Duly Authorized Agent
(Attach Evidence of Authorization)

*

Date

***MUST BE COMPLETED IN ORDER TO BE GIVEN A HEARING**

IMPORTANT - Please note any Wednesday evening in March you would **NOT** be able to be scheduled for an appointment since there are **NO** reschedules.

3/1 _____ 3/8 _____ 3/15 _____ 3/22 _____ 3/29 _____

This form must be completed and received by **February 17, 2023**

BOARD OF ASSESSMENT APPEALS

% TAX ASSESSORS OFFICE

ATTN: JILL COOLBETH

10 MAIN STREET

NEW MILFORD, CT 06776

OR

FX-860-355-3319, EMAIL: JCOOLBETH@NEWMILFORD.ORG

**Board of Assessment Appeals
Town of New Milford, Connecticut 06776
JCoolbeth@NewMilford.org**

AUTHORIZATION FORM

I, _____ being the legal owner of property located
at: _____

Hereby authorizes _____ to act as my agent in all
matters before the Board of Assessment Appeals for the Town of New Milford,
State of Connecticut, for the Assessment year October 1, 2022, MV Supp of
October 1, 2021.

Owner's Signature: _____
Date: _____