

**Town of Ledyard**

**Board of Assessment Appeals (BAA) – Motor Vehicle Hearing Request**

Pursuant to CGS§12-110, the Board of Assessment Appeals in each town shall meet at least once in the month of September for the sole purpose of hearing appeals related to the assessment of motor vehicles.

Note: The applicant is encouraged to bring documents/photographs to show to the Board of Assessment Appeals why he/she believes the assessed value is in error and why the proposed value is correct.

**Applicant/Appellant:** \_\_\_\_\_

**Vehicle Owner:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone Number:** (     ) \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Vehicle:**     **Grand List Year:** 2021     **List Number:** \_\_\_\_\_

**Make:** \_\_\_\_\_ **Model:** \_\_\_\_\_

**Year:** \_\_\_\_\_ **Mileage:** \_\_\_\_\_ **VIN:** \_\_\_\_\_

**Vehicle Condition:(please circle)**     **Poor/Junk**     **Fair**     **Good**     **Very Good**     **Excellent**

**Owner’s Estimate of Market Value:**     \$ \_\_\_\_\_

**Reason for Appeal & Justification of Estimated Market Value:** \_\_\_\_\_

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

(Attach or bring additional pages and/or photos as appropriate)

*I declare, under oath, that the foregoing information, according to the best of my knowledge, remembrance and belief, are true statements.*

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*\*\*\* *Reserved for Use By Board of Assessment Appeals* \*\*\*\*\*

**Hearing Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_ **Location:** \_\_\_\_\_

**Grand List Assessment:**     \$ \_\_\_\_\_

**BAA Notes:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**BAA Decision of Assessment:**     \$ \_\_\_\_\_

\_\_\_\_\_  
**BAA Chairman**

\_\_\_\_\_  
**BAA Member**

\_\_\_\_\_  
**BAA Member**

\_\_\_\_\_  
**Date**