



# Town of Bethlehem Board of Assessment Appeals

36 Main Street S • P.O. Box 160  
Bethlehem, CT 06751-0160  
203-266-7510 Ext. 3

A written application to appeal an assessment must be filed on or before February 20, 2024 pursuant to P.A. 95-283 of the State of Connecticut - application must be in the office by Tuesday, February 20th at 12:00 p.m. by close of business. No emailed or faxed applications will be accepted.

Property Type: Real Estate \_\_\_\_\_ Personal Property (Business) \_\_\_\_\_ Motor Vehicle \_\_\_\_\_

Property Location (address or map/block/lot) \_\_\_\_\_

Real Estate Account #: \_\_\_\_\_ Personal Property Account: \_\_\_\_\_

Motor Vehicle Information: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Email Address: \_\_\_\_\_

Property owner will be represented by: self \_\_\_\_\_ agent \_\_\_\_\_

Signature of Owner/agent: \_\_\_\_\_ Date: \_\_\_\_\_

Name and address for all correspondence: \_\_\_\_\_ Telephone Number \_\_\_\_\_

Name: \_\_\_\_\_

Street: \_\_\_\_\_ Email Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

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

Owner/Appellant's Estimate of Value (required by statute) \_\_\_\_\_

Please note: This form must be completed in its entirety. Property owners owning more than one property must file a separate form for each property appealed. Please type or print legibly. Appeals must be submitted in office no later than February 20, 2024 at 12:00 p.m. Emailed or faxed applications will not be accepted.

### AGENT'S CERTIFICATION

Date:

To whom it may concern: I, \_\_\_\_\_ being the legal property owners located at \_\_\_\_\_ hereby authorize \_\_\_\_\_ to act as agent in all matters before the Board of Assessment Appeals of the Town of Bethlehem for the Grand List of October 1,

Owner \_\_\_\_\_  
(print name)

Signature of Owner \_\_\_\_\_