PETITION TO THE BOARD OF ASSESSMENT APPEALS TOWN OF SALISBURY, CT

Must be completed and received by Town Clerk by <u>February 17, 2023</u> (By authority of Public Act 95-283, of the State of Connecticut)

Print or type the following information about the property being appealed. Please complete a separate application for each property you wish to appeal. Every item MUST be completed to be given a hearing and applicant or agent must appear in person at scheduled hearing.

GRAND LIST OF OCTOBER 1, 2022

Property owner's name:		
Property location:	(Number & Stree	t)
Reason for appeal:		
Appellant's estimate of value:(Atta	ach documentation	of value)
Mailing address, <u>EMAIL & phone nu</u>	<u>mber</u> of property o	wners:
Would you allow BAA to do an interio In-person hearing:		ur home: Yes No ual:
Signature of all property owners or duly authorized agent (attach evidence of		Date
authorization) Completed forms should be returned to:	Board of Assessment Appeals C/o Town Clerk Town of Salisbury P.O. Box 548 Salisbury, CT 06068	
To be filled out by the BAA and returned to Your hearing is scheduled at Town Hall as		time