

# New London Board of Assessment Appeals

In accordance with Sec. 12-111 & Sec 12-117, the Board of Assessment Appeals shall meet during the month of September for the hearing of appeals for motor vehicles that appear on the October 2025 Grand List

The petitioner or agent must appear in person on the appeal date, which will be posted on our website or may be obtained by contacting the Assessor's Office at (860) 447-5216

Applications may be sent to:

New London Board of Assessment Appeals  
15 Masonic St  
New London, CT. 06320  
or e-mailed to:

DPietrella@Newlondonct.gov

## Application to Appeal Motor Vehicle

|                                                                                                |  |                                                |                                                                                                                                                                                                   |           |             |
|------------------------------------------------------------------------------------------------|--|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------|
| <b>Property Owner:</b>                                                                         |  | Grand List of: <b>10/1/2025</b>                |                                                                                                                                                                                                   | List No.: |             |
| Name                                                                                           |  | <b>Property Description:</b>                   |                                                                                                                                                                                                   |           |             |
| Address                                                                                        |  |                                                |                                                                                                                                                                                                   |           |             |
| City/State/Zip                                                                                 |  | Vehicle Yr, Make & Model                       |                                                                                                                                                                                                   |           |             |
|                                                                                                |  | Map/Block/Lot                                  | N/A                                                                                                                                                                                               |           |             |
| <b>Appellant:</b>                                                                              |  | Property type                                  | <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial<br><input type="checkbox"/> Motor vehicle <input type="checkbox"/> Personal property |           |             |
| Name                                                                                           |  | <b>Reason for appeal:</b>                      |                                                                                                                                                                                                   |           |             |
| Address                                                                                        |  |                                                |                                                                                                                                                                                                   |           |             |
| City/State/Zip                                                                                 |  |                                                |                                                                                                                                                                                                   |           |             |
| <b>Correspondence &amp; Contact:</b>                                                           |  | <b>Appellant's estimate of value:</b>          |                                                                                                                                                                                                   |           |             |
| Name                                                                                           |  |                                                |                                                                                                                                                                                                   |           |             |
| Address                                                                                        |  |                                                |                                                                                                                                                                                                   |           |             |
| City/State/Zip                                                                                 |  |                                                |                                                                                                                                                                                                   |           |             |
| Phone No.                                                                                      |  | (attach documentation of value, if applicable) |                                                                                                                                                                                                   |           |             |
| <b>Signature of Property owner or duly authorized agent( attach evidence of authorization)</b> |  |                                                |                                                                                                                                                                                                   |           | <b>Date</b> |
| X                                                                                              |  |                                                |                                                                                                                                                                                                   |           |             |

|                                            |      |      |       |
|--------------------------------------------|------|------|-------|
| <b>Board of Assessment Appeals has:</b>    | Date | Time | Place |
| <b>scheduled an appointment as follows</b> |      |      |       |

## Appeal Summary

| Assessments   | Grand List | Board of Assessment Appeals |
|---------------|------------|-----------------------------|
| Motor Vehicle | \$         | \$                          |
|               |            |                             |
|               |            |                             |
|               |            |                             |

**Board of Assessment Appeals: (signatures)**

X \_\_\_\_\_ X \_\_\_\_\_

X \_\_\_\_\_ Date of Board's Decision: \_\_\_\_\_