

**PETITION TO THE  
BOARD OF ASSESSMENT APPEALS  
TOWN OF BETHEL, CONNECTICUT**

(filing period FEBRUARY 1, - FEBRUARY 20, 200\_\_)

By authority of Public Act 95-283, of the State of Connecticut  
Please print or type the following information about each property appealed.  
**(One application per parcel)**

**Grand List of October 1, 200\_\_**

Property Owner's Name: \_\_\_\_\_

Appellant's Name: \_\_\_\_\_

Property Location: \_\_\_\_\_

Map/Block/Map: \_\_\_\_\_

Property Type: \_\_\_\_\_  
*(Residential, Commercial, Industrial, Personal Property, Motor Vehicle)*

Reason for appeal: *(ATTACH ADDITIONAL SHEETS OF NEEDED)*

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

**Appellant's estimate of value: \$** \_\_\_\_\_  
*(Attach documentation of value, if applicable)*

Name, Mailing address and phone number of party to be sent correspondence:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_

\_\_\_\_\_  
Signature of property owner or duly authorized agent  
*(Attach proof of authorization)*

\_\_\_\_\_  
Date

**ALL SECTIONS MUST BE COMPLETED IN ORDER TO BE GIVEN A HEARING  
THIS FORM MUST BE FILED BY FEBRUARY 20<sup>TH</sup> AND RETURNED TO:  
BOARD OF ASSESSMENT APPEALS  
CLIFFORD J. HURGIN MUNICIPAL CENTER  
1 SCHOOL STREET  
BETHEL, CT 06801**

DATE, TIME AND PLACE OF HEARING: \_\_\_\_\_

APPEAL NUMBER: \_\_\_\_\_