



**Town of Burlington**  
**Board of Assessment Appeals**  
200 Spielman Highway ▪ Burlington, CT 06013  
860-673-6789 Ext. 3

A written application to appeal an assessment must be filed on or before February 20, 2025, pursuant to P.A. 95-283 of the State of Connecticut - **application must be in the office by Friday, February 20<sup>th</sup>, 2026 at noon.**

**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:**

**Name:** \_\_\_\_\_ **Telephone Number** \_\_\_\_\_

**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 no later than February 20, 2026.

**AGENT'S CERTIFICATION**

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

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

**Owner** \_\_\_\_\_ **Signature of Owner** \_\_\_\_\_  
(print name)