



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 Thursday, February 20th, 2025 at 4:00 p.m.** Emailed or faxed applications will not 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:

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, 2025. 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 Burlington for the Grand List of October 1, _____.

Owner _____ (print name) _____ Signature of Owner _____