PETITION TO THE BOARD OF ASSESSMENT APPEALS

CITY OF DERBY

Must be filed by <u>February 19th</u>, 2021

By the authority of Public Act 95-283, of the State of Connecticut, Please print or type the following information about each property appealed.

GRAND LIST OF OCTOBER 1, 2020

PROPERTY OWNERS NAME:			
APPELLANT'S NAME:			
PROPERTY LOCATION:			
MAP/LOT:	ACCO	UNT NUMBER:	
PROPERTY TYPE:			
REASON FOR APPEAL:			
APPELLANT'S ESTIMATE OF DOCUMENTATION):	VALUE (PLEASE	ATTACH ANY SUPI	PORTING
Name, address, and phon	e number of party	to be sent correspon	dence:
SIGNATURE of Property Owner Duly Authorized Agent (Attach proof of authorization)	r <u>or</u>		DATE
ALL SECTIONS MUST BE ((CALL ASSESSOR'S OFFICE A			
THIS FORM MUST BE FIL	ED BY FEBRUAR	XY 19th, 2021 AND R	ETURNED TO:
City of	Derby, Board of As c/o Assessor's (1 Elizabeth St Derby, CT 06	Office reet	
DATE OF HEARING:	TIME:	PLACE:	