

## **BOARD OF ASSESSMENT APPEALS GUIDELINES**

1. The legal owner of the property must appear at the Scheduled Appointment or the person representing the owner **MUST** have submitted an Agent Authorization Letter allowing them to appear on behalf of the owner.
2. Complete form but **“DO NOT SIGN”**.
3. **RETURN FORM BY FEBRUARY 20, 2025 AND YOU WILL RECEIVE YOUR APPOINTMENT DATE AND TIME BY MAIL. APPOINTMENT TIME AND DATE CAN NOT BE CHANGED.**
4. **Your Application must include all items to substantiate your request for a reduction.** These items may include, but are not limited to the following:
  - i) An appraisal (not more than 1 year old) of your property by a certified appraiser prepared for the purposes of the Board of Assessment Appeal utilizing comparable sales from the appropriate grand list year.
  - ii) A listing of sales of similar properties which have sold during the applicable Grand List Year.
  - iii) Documentation of any errors which you feel may have been made on your street card, for example: size of land, size of building, condition of building, number of baths, type of heating, air conditioning, etc.
  - iv) A listing of properties similar to yours, which may have lower assessments.
  - v) Any maps or deeds which indicate that the land area may be wrong.
  - vi) Submitted documentation should be copies, as they will remain the property of the Board of Assessment Appeals. It is also noted that copies of any income and expense & personal property declarations submitted will become public information.
  - vii) Photographs that are submitted are not returned.
5. After your hearing, your hearing officer will present your case to the entire board for consideration and a decision.
6. You will be notified in writing of the Board’s final decision regarding your appeal.
7. A valid telephone number and email are REQUIRED.
8. **PLEASE PRINT CLEARLY.**

**\*\*Forms can be emailed up until 4:30 PM on February 20, 2025.\*\***

The email address is [cfisher@branford-ct.gov](mailto:cfisher@branford-ct.gov) . Applicants are responsible to insure timely delivery. We are not responsible for lost or undelivered applications. **All Town Hall Offices are CLOSED on Monday, February 17, 2025.**

**Applications cannot be accepted on Friday, the 21<sup>st</sup>.**

**POSTMARKS ARE NOT CONSIDERED AS TIMELY FILINGS.**

# Branford Board of Assessment Appeals

Applications may be sent to:  
 Board of Assessment Appeals  
 c/o Assessor's Office  
 1019 Main Street  
 Branford, CT 06405

Pursuant to P.A. 95-283, of the State of Connecticut  
 an application to appeal an assessment must be filed

**between February 1, 2025 and February 20, 2025**  
**The Assessor's Office and Town Hall are CLOSED at 4:30 pm.**

Property Owner	
Name	
Address	
City	
State	
Zip	

Grand List of:	2024	Account #	
Property Description:			
Address			
Business Name			
Map/Block/Lot			
<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Motor Vehicle Sup <input type="checkbox"/> Personal Property			

Mailing Address & Contact Person	
Name	
Address	
City	
State	
Zip	
Ph #(s)	
E-mail	

Reason for Appeal:

Appellant's Estimate of Value (Assessment):

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**ALL HEARINGS ARE RECORDED DO NOT WRITE BELOW THIS LINE**

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 Signature of property owner or duly authorized agent (attach evidence of authorization)

X \_\_\_\_\_ DATE \_\_\_\_\_

Date	Time	Hearing Officer

OLD ASSESSMENT

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NEW ASSESSMENT

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CHANGE

NO CHANGE

**Board of Assessment Appeals Signatures:**

X _____	X _____
X _____	X _____
X _____	X _____

Notice of time sent: \_\_\_\_\_

Notice of Decision sent: \_\_\_\_\_

## AGENT'S CERTIFICATION

DATE: \_\_\_\_\_

To whom it may concern:

I, \_\_\_\_\_ being the legal owner of property  
identified as \_\_\_\_\_ hereby authorize  
\_\_\_\_\_ to act as my agent in all matters before the Board of  
Assessment Appeals of the Town of Branford for the assessment year commencing October 1,  
2024.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Telephone \_\_\_\_\_