

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

Filing period February 1, 2025 through February 20, 2025

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, 2024

Property Owner's Name _____

Appellant's Name _____

Map/Block/Lot _____

Property Type _____

(Residential, Commercial, Industrial, Personal Property, Motor Vehicle)

Reason for appeal: (Attach additional sheets if 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 Number _____

Signature of property owner or duly authorized agent

Date

**ALL SECTIONS MUST BE COMPLETED IN ORDER TO BE GIVEN A HEARING
THIS FORM MUST BE FILED ON OR BEFORE FEBRUARY 20TH AND RETURNED TO:**

BOARD OF ASSESSMENT APPEALS
CLIFFORD J. HURGIN MUNICIPAL CENTER
1 SCHOOL STREET
BETHEL, CT. 06801

DATE, TIME AND PLACE OF HEARING: _____