



## BOARD OF ASSESSMENT APPEALS APPLICATION

Pursuant to Sec. 12-111 of the Connecticut General Statutes  
a written application to appeal an assessment must be filed  
**and received on or before February 20, 2026**

Please complete all sections of the application with an asterisk  
**Return application to address shown at the right**

**Applications may be sent to:**  
Board of Assessment Appeals  
C/O Assessor's Office  
PO Box 519  
108 Pennsylvania Ave  
Niantic, CT 06357

<b>* Property Owner</b>		Grand List of 2025	List #
Name _____		<b>*Property Description</b>	
Mailing Address _____		Location _____	
City/State/Zip _____		Map/Lot _____	
Phone # _____		<b>Property Type</b>	
<b>* Property owner will be represented by</b> <input type="checkbox"/> self <input type="checkbox"/> agent (If agent, owner must complete <u>authorization form</u> - see reverse side)		<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Personal Property <input type="checkbox"/> Motor Vehicle	
<b>* Appellant</b>		<b>* Reason for Appeal</b>	
Name _____		_____	
Address _____		_____	
City/State/Zip _____		_____	
Phone # _____		_____	
<b>* Correspondence &amp; Contact</b> (if different from Owner)		<b>* Appellant's Estimate of Value</b>	
Name _____		(real estate value is based on 10/1/2021 Revaluation)	
Address _____		_____	
City/State/Zip _____		(attach documentation of value)	
Phone # _____			
<b>* Signature of owner or duly authorized agent</b> (attach evidence of agent authorization) _____			<b>Date</b> _____

### PLEASE DO NOT WRITE BELOW THIS LINE

<b>Board of Assessment Appeals has scheduled an appointment as follows</b>	<b>Date</b>	<b>Time</b>	<b>Place</b>
			East Lyme Town Hall 108 Pennsylvania Ave Niantic, CT 06357
<b>Appeal Summary</b> _____			

Assessments	Grand List 2025	Board of Assessment Appeals
Land		
Building		
Total		
Motor Vehicle		
Personal Property		

### Board of Assessment Appeals: (signatures)

X _____	X _____
X _____	X _____
X _____	Date of Board Decision _____

## AUTHORIZATION FORM

### To the Board of Assessment Appeals of the Town of East Lyme

I, \_\_\_\_\_  
being the legal owner of \_\_\_\_\_  
hereby authorize \_\_\_\_\_  
to act as my agent in all matters before the East Lyme Board of Assessment Appeals.

Property Owners Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Property Owner's Address: \_\_\_\_\_

\_\_\_\_\_