

Signature of Assessor/Staff

## Motor Vehicle Property Tax Exemption Application for Members of the Armed Forces

Jessica Sypher Assessor Town of Essex 29 West Avenue Essex, CT 06426 Telephone: (860) 767-4340

Fax: (860) 767-8509

## TOWN OF ESSEX, CONNECTICUT

IF YOU CLAIM EXEMPTION IN THE TOWN OF ESSEX FOR TAXES ON YOUR MOTOR VEHICLE UNDER CGS \$12-81(53), IT WILL BE NECESSARY FOR YOU TO COMPLETE THE FOLLOWING. A NEW APPLICATION MUST BE FILED ANNUALLY WITH THIS OFFICE. FAILURE TO FILE THIS APPLICATION PRIOR TO DECEMBER 31<sup>ST</sup> NEXT, FOLLOWING THE TAX DUE DATE, SHALL CONSTITUTE A WAIVER OF YOUR RIGHT TO THIS EXEMPTION.

Military Information			
1. On October 1,, I was an active member of the armed forces, as defined in CGS§ 27-103. (Year of most recent past October 1st)			
2. On the assessment date, I was attached to the following unit:			
3. I have served in this unit	since (month /date/year)		
4. My permanent address is	: Number & Street or PO Box	City or Town	State & Zip Code
5. Mailing address:	Number & Street or PO Box	City or Town	State & Zip Code
Vehicle Information			
6. Vehicle Registration (Plate) Number: Make, Model and Year:			
7. On the assessment date, this vehicle was (check one): Owned† Leased† (For leased vehicle complete 7 and 8)			
8. Lease term: to: to: Lessor: (Name of vehicle owner as it appears on the lease)			
9. Lessor's Address:	umber & Street or PO Box	City or Town	State& Zip Cod
Attestation Statement			
I hereby claim a motor vehicle property tax exemption or tax refund for a leased vehicle, pursuant to CGS§ 12-81(53). All Information herein provided is true and accurate to the best of my knowledge and belief.			
Signature of Active Duty Service Member Signature		Signature of Commanding Officer	Date Signed
Print Name			
Office Use Only			
GRAND LIST YEAR: Regular† Supplemental† VEHICLE ASSESSMENT \$			

Date