

TOWN OF



PLAINVILLE

ONE CENTRAL SQUARE, PLAINVILLE, CONNECTICUT 06062-1955

IF YOU CLAIM EXEMPTION IN THE TOWN OF PLAINVILLE 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 31st 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 duty 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 been an Active Duty member of the Armed Forces since (month/date/year): ____/____/____
4. My permanent address is: _____ Number & Street or PO Box _____ City or Town _____ State & Zip Code
5. My mailing address is: _____ Number & Street or PO Box _____ City or Town _____ State & Zip Code
6. Email Address: _____

Vehicle Information

- 7. Vehicle Registration (Plate) Number: _____ Make, Model and Year: _____
8. On the assessment date, this vehicle was (check one): Owned [] Leased [] (For leased complete 8 & 9)
9. Lease Term: _____ to: _____ Lessor: _____ From(Mo/Date/Yr To(Mo/Date/Yr (Name of vehicle owner as it appears on the lease)

Attestation Statement

I hereby claim a motor vehicle property tax exemption 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

Date Signed

Office Use Only

GRAND LIST YEAR: _____ Regular [] Supplemental [] Vehicle Assessment \$ _____

Signature of Assessor/Staff

Date