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Assessing Division
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Motor Vehicle Property Tax Exemption or Benefit Application for Connecticut Resident on Active/Reserve Military Duty

IF YOU CLAIM EXEMPTION IN THE TOWN OF WALLINGFORD 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 FOLLOWING THE TAX DUE DATE SHALL CONSTITUTE A WAIVER OF YOUR RIGHT TO THIS EXEMPTION.

		Military Info	ormation		
1.	On October 1, I was an active/reserve duty member of the armed forces, as defined in CGS §27-100				
2.	(Year of most recent past October 1st On the assessment date, I was attached to the following the control of the following the control of the	_			
3.	My permanent address is: Nt	City or Town		State & Zip Code	
		Vehicle Info	ormation		
4.	Vehicle Registration (Plate) Number: Year, Make, and Model:				
5.	Vehicle Identification Number (VIN):				
6.	On the assessment date, this vehicle was (check	one): Owned □	Leased □ by me	(For leased vehicle,	complete 7 and 8.)
7.	Lessor:				
	(Name of vehicle owner as it appears on lease)				
8.	Lessor Address: Number & Street or PO Box City or Town State & Zip Code				
9.	D C 11 111	51 FO B0x			
		Number & Street or PO Box		City or Town	
		Attestation S	Statement		
	I hereby claim a motor vehicle property tax exen All information herein provided is true and accur	nption or tax refund fo ate to the best of my k	or the above vehicle, pursu knowledge and belief.	uant to CGS §12-81(53).
	Signature of Active Duty Service Member	Date	Military ID Presen or Copy Att		
	Name of Servicemember (Please Print)				
		Office Use	Only		
GR	AND LIST YEAR: Regular 🗆	Supplemental	VEHICLE ASSES	SSMENT: \$	
	Signature of Assessor /Staff	— Date			