

Applicant MUST provide copies of factual evidence related to the appeal at the hearing for any changes to be considered.

# STAMFORD BOARD OF ASSESSMENT APPEALS APPEAL FORM FOR OCTOBER 1, 2025 GRAND LIST

NOTE: Assessed value is based on the October 1, 2022 Revaluation.

No. \_\_\_\_\_  
Hearing Date: \_\_\_\_\_

**Applications will be accepted if filed and received by the Assessor's Office by 4:30 PM, February 20<sup>th</sup>, 2026  
POSTMARK DATE WILL NOT BE ACCEPTED**

You will receive **notification by mail** as to the date and time of your hearing. All appeals will be *by appointment only*. Please bring copies of evidence or supporting documents for your appeal to the hearing and do not submit them with this application.

**Applications may be faxed, emailed, dropped off in the lobby of the Stamford Government Center or mailed to:  
Board of Assessment Appeals, 888 Washington Blvd., 6<sup>th</sup> Floor, Stamford, CT 06901  
Fax Number: (203) 977-5553 Email: BAAStamford@stamfordct.gov**

Pursuant to the General Statutes of the State of Connecticut, the undersigned appeals from the assessment as fixed by the Assessor to the Board of Assessment Appeals for equalization and adjustment on the following described property.

Listed Owner: \_\_\_\_\_ Acct #, Unique ID or List # \_\_\_\_\_  
Street Location of Property \_\_\_\_\_ Lot # (for real estate only) \_\_\_\_\_  
Mailing Address of Owner: \_\_\_\_\_  
Mailing Address of Agent: \_\_\_\_\_  
Owner telephone: ( ) \_\_\_\_\_ Agent Phone: ( ) \_\_\_\_\_

*CHECK SQUARE BELOW OF PROPERTY BEING APPEALED AND FILL IN REQUIRED INFORMATION (\*)*

**RESIDENTIAL**

\*Description: Single Family 2 Family 3 Family Condo Vacant lot other: \_\_\_\_\_  
Gross Rental Rec'd: \_\_\_\_\_ Age of Building: \_\_\_\_\_ If New, Cost of Construction: \_\_\_\_\_  
Total Purchase Price: \_\_\_\_\_ Year Purchased: \_\_\_\_\_ \*Opinion of Fair Market Value (entire property): \_\_\_\_\_  
10/1/2025 Assessment: \_\_\_\_\_

**COMMERCIAL OR INDUSTRIAL** (Includes apartments of 4 or more units):

Description of Property: \_\_\_\_\_  
Number of Stores: \_\_\_\_\_ Number of Families: \_\_\_\_\_ Age of Building(s): \_\_\_\_\_  
If New, Cost of Construction: \_\_\_\_\_ Year Purchased: \_\_\_\_\_ Total Purchase Price: \_\_\_\_\_  
If Leased, state whether Gross lease or Net lease: \_\_\_\_\_ Gross Income and Expenses: \_\_\_\_\_  
Submit copies of Current and Prior Years' Operating Statements: \_\_\_\_\_  
\*Opinion of Fair Market Value (entire property): \_\_\_\_\_ 10/1/2025 Total Assessment: \_\_\_\_\_

**COMMERCIAL VACANT LAND ONLY**

Year Purchased: \_\_\_\_\_ Total Purchase Price: \_\_\_\_\_ 10/1/2025 Total Assessment: \_\_\_\_\_  
State Condition of the Land: \_\_\_\_\_  
\*Opinion of Fair Market Value (entire property) \_\_\_\_\_

**PERSONAL PROPERTY**

Book Value of Furniture & Fixtures: \_\_\_\_\_ Date: \_\_\_\_\_ 10/1/2025 Total Assessment: \_\_\_\_\_  
Book Value of Machinery & Equip: \_\_\_\_\_ Date: \_\_\_\_\_ \*Opinion of Value 10/1/2025: \_\_\_\_\_

**MOTOR VEHICLE** (2024 Supplemental Grand List or MTS bill for \_\_\_\_\_ Grand List)

\*Make of Vehicle: \_\_\_\_\_ \*Model: \_\_\_\_\_ \*Body Style: \_\_\_\_\_ Assessment: \_\_\_\_\_  
\*VIN Number: \_\_\_\_\_ \*Opinion of Fair Market Value: \_\_\_\_\_

\*REASON FOR APPEAL (Attach Additional Sheets if needed): \_\_\_\_\_  
\_\_\_\_\_

**Upon reasonable notice, the undersigned agrees to appear before the Board of Assessment Appeal and answer all further questions pertaining to the above appeal. The undersigned deposes and says that the above statements are true.**

Signature of Owner: \_\_\_\_\_ Signature of Agent: \_\_\_\_\_

Printed Name of Owner: \_\_\_\_\_ Printed Name of Agent: \_\_\_\_\_

**AGENT'S CERTIFICATION**

I, \_\_\_\_\_ being the legal owner of the above-mentioned property authorize \_\_\_\_\_ to act as my agent in all matters before the Board of Assessment Appeals of the City of Stamford.

\_\_\_\_\_  
(Owner's signature authorizing Agent's Service)

As provided for by Connecticut General Statute Sec. 12-117a: Any person, including any lessee of real property who is bound under terms of his lease to pay real property taxes, claiming to be aggrieved by the action of the Board of Assessment Appeals, may, within two months from the date of the mailing of the notice of action, make application, in the nature of an appeal of the assessment list for the assessment year commencing October 1, 2025, to the Stamford Superior Court, which shall be accompanied by a citation to the city to appear before said court.