Application for Connecticut Resident's Motor Vehicle Property Tax Exemption Application Due to Membership in the Armed Forces of the United States

Members of the United States armed forces (including reserve components and the National Guard) are eligible to claim a property tax exemption for one motor vehicle under CGS §12-81(53). To do so, complete this form and submit it to the Assessor, not later than the thirty-first day of December next following the date the property tax on the vehicle described below is due. Failure to file by the deadline constitutes a waiver of the right to claim the property tax exemption under §12-81(53).

Military Information

1. Name / Rank (Please print):

2. On the assessment date of October 1, _________, I was an active member of the armed forces, as defined in CGS § 27-103.

3. On the assessment date, I was attached to: ____________________________

   Name of Unit

4. I have served in this unit since: _________/_______/_______
   Month    Date    Year

5. Permanent address: ____________________________
   Number & Street or PO Box    City or Town    State & Zip Code

6. Mailing address: ____________________________
   Number & Street or PO Box    City or Town    State & Zip Code

Vehicle Information

7. Vehicle Registration (Plate) Number: ___________ Make, Model and Year: ___________

8. On the assessment date, this vehicle was: Owned □ Leased □ (If leased, complete 9 and 10.)

9. LeaseTerm: _______/_______/_______ to: _______/_______/_______ Lessor: ____________________________
   From (Month/Date/Year)    To (Month/Date/Year)    (Name of vehicle owner as it appears on the lease)

10. Lessor's Address: ____________________________
    Number & Street or PO Box    City or Town    State & Zip Code

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 Service Member          Signature of Commanding Officer
/     /    (Month/Date/Year)

Assessor's Office Use Only

GRAND LIST YEAR: _______ Regular □ Supplemental □ VEHICLE ASSESSMENT $ ___________

_________________________          ____________________________
Signature of Assessor/Member of Assessor's Staff          (Month/Date/Year)