

PETITION TO THE
BOARD OF ASSESSMENT APPEALS
CITY OF DERBY

Must be filed by February 20, 2026

By the authority of Public Act 95-283, of the State of Connecticut.
Please print or type the following information about each property appealed.
GRAND LIST OF OCTOBER 1, 2025

PROPERTY OWNERS NAME: _____

APPELLANT'S NAME: _____

PROPERTY LOCATION: _____

MAP/LOT: _____ **ACCOUNT NUMBER:** _____

PROPERTY TYPE: _____

REASON FOR APPEAL: _____

APPELLANT'S ESTIMATE OF VALUE (PLEASE ATTACH ANY SUPPORTING DOCUMENTATION): _____

Name, Address, Phone number, and Email of party to be sent correspondence:

SIGNATURE of Property Owner or
Duly Authorized Agent
(Attach proof of authorization)

DATE

ALL SECTIONS MUST BE COMPLETED IN ORDER TO BE GIVEN A HEARING.
(CALL ASSESSOR'S OFFICE IF FURTHER INFORMATION IS REQUIRED)

THIS FORM MUST BE FILED BY FEBRUARY 20TH 2026 AND RETURNED

Board of Assessment Appeals,
City of Derby
1 Elizabeth St - Derby, CT 06418

DATE OF HEARING: _____ **TIME:** _____ **PLACE:** _____