Town of Colchester

127 Norwich Avenue, Colchester, CT 06415-1230 Phone (860) 537-7205 Fax (860) 537-1147 Email hcavanaugh@colchesterct.gov

TO:

Deliver declaration to:

Town of Colchester Assessor's Office 127 Norwich Avenue Colchester, CT 06415-1230

DO NOT DISREGARD THIS FORM IT MUST BE FILED ANNUALLY WITH THE ASSESSOR'S OFFICE

2021 Declaration of Personal Property - MV FORM Colchester, Connecticut

Filing Requirement – This declaration must be completed and filed with the Assessor of the town where the personal property is located. Declarations of personal property shall be made annually. Writing "Same as last year" is not acceptable.

Penalty for late filing – Failure to file timely will result in a penalty equal to 25% of the assessment of the personal property. This declaration must be filed or postmarked (as defined in C.G.S. Sec 1-2a) no later than: **November 1, 2021**

Extension: The Assessor may grant a filing extension *for good cause* (CGS §12-42). If a request for an extension is needed, you need to contact the Assessor in writing by:

Monday, November 1, 2021

If you no longer own the personal property assessed in your name last year or moved the property out of this town, you must return this declaration to the Assessor and provide information related to the name of the new owner of the property or to where you moved the property (see below). Otherwise, the Assessor must assume that you still own and have failed to declare your taxable personal property.

	of		
Owners name	Mailing Address	City, State, and Zip	
ith regards to	personal property do so certify that on	Said property was (indicate which one by circling):	
	Date		
SOLD TO:			
And/Or	Name	Address	
MOVED TO:			
	City/Town and State to where camper was moved	Address	
The sigr	ner is made aware that the penalty for making a false a	ffidavit is a \$500.00 fine or imprisonment for one year or both.	

	Property Declaration – egistered or non-registered veh	Motor Vehicle Form icles such as vehicle types listed b	elow
List or Account #:	sgistered of flori-registered veri		nt date October 1, 202
Owner's Name:	Required return date November 1, 202		
Address		Location of personal propert	y in this town.
City/State/Zip			
Phone / Fax () / ()	E-Mail	
Copy and attach additional s	heets if needed for addi	tional vehicles	
#9 MOTOR VEHICLES Unregistered motor vehicle passenger cars, tractors, off-road construction vehicle but registered in another state or another Conne	vehicles, etc.) including any	vehicle garaged in this town	Assessor's USE ONLY
Describe your personal property located in this	town below:		
/ehicle type: ☐ Camp Trailer ☐ Travel T	railer 🔲 Park Model 🔲 N	Motor Home Fifth Wheel	
☐ Pick-up Camper, slide-on	☐ Pick-up Camper, slide-on ☐ Pick-up Camper, chassis-unit☐ Slide Outs		
Motorcycle	☐ Motor Scooter	Snowmobile	
☐ Golf Cart	Off-road construction ve	hicle Passenger Car	
Registered No Yes – give town and state:		Marker Plate:	
Purchase Date:	Purchase Pric	 ce:	
Vehicle Description and Information	Additional Descript	ion for Truck/Trailer/Campers	
Year:	Length:		
Make:	Width:		
Model:	Weight:		
Body:	Engine Type:		
Color:	Chassis:		
VIN:	Brake System:		,
	#9		
#25 – Penalty for failure to file as required by st			#25
	Asses	sor's Final Assessment Total >	
This form must be signed (ar Avoid Penalty - DO HEREBY declare under penalty of false stateme nowledge, remembrance, and belief; that it is a true s mporarily disposed of any estate for the purpose of Owner's	Notarize Personal Property Decla nt that all sections of this decla statement of all my personal pr	e it may be filed with the Assessor. ration signed by agent. ration have been completed accor operty liable to taxation; and that I assessment and collection of taxe	have not conveyed or
Signature	ture (print owner's name on line below)	Date	
Owner's Signal	ure (built owners hame on line below)		
I DO HEREBY declare under oath that I have been authority and knowledge sufficient to file a proper of Agent's	rint or type owner's name I duly appointed agent for the of declaration for him in accord with	th the provisions of §12-50 C.G.S.	and that I have full
Signature Agent's Signat	ture (print agent's name on line below)	Date	
	,		
	rint or type agent's name		
Witness of agent's sworn statement Subscribed and sworn to before me -		Date	

Assessor or staff member, Town Clerk, Justice of the Peace, Notary or Commissioner of Superior Court