

**Application For Motor Vehicle Property Tax Exemption Or Exemption Benefit For Connecticut Residents  
On Active Military Duty Who Are Stationed Outside The State of Connecticut On The Assessment Date**

This form must be completed and returned to the assessor of the town in which the vehicle described below is subject to taxation, not later than the thirty-first day of December next following the date the property tax is due. The assessor may require you to submit information verifying a motor vehicle lease. Failure to file by the deadline constitutes a waiver of the right to claim the property tax exemption or refund under §12-81(53).

**Military Information**

1. On October 1, \_\_\_\_\_, (hereinafter the assessment date) I was an active duty member of the United States Armed Forces.
2. I have been an active duty Armed Forces service member since \_\_\_\_\_  
(Mo/Date/Yr)
3. As a result of my official military orders, I was not in Connecticut on the assessment date. Yes  No
4. On that date, I was attached to the following duty station, where my vehicle was garaged: \_\_\_\_\_
5. Permanent address on assessment date: \_\_\_\_\_  

Number & Street	City or Town	State & Zip Code
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**Vehicle Information**

6. Vehicle Registration (Plate) Number: \_\_\_\_\_ Make, Model and Year: \_\_\_\_\_
7. On the assessment date, this vehicle was Owned  Leased  by me. (For leased vehicle, complete 8, 9 and 10.)
8. Leased From: \_\_\_\_\_ To: \_\_\_\_\_ Lessor: \_\_\_\_\_  

(Mo/Date/Yr)	(Mo/Date/Yr)	(Name of vehicle owner as it appears on lease)
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9. Lessor Address: \_\_\_\_\_  

Number & Street or PO Box	City or Town	State & Zip Code
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10. Refund should be sent to me at: \_\_\_\_\_  

Number & Street or PO Box	City or Town	State & Zip Code
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**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.

**Name of Active Duty Service Member (please print)** \_\_\_\_\_

\_\_\_\_\_  
Signature of Active Duty Service Member

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature of Commanding Officer

**For Municipal Use Only**

Regular Grand List  Supplemental Grand List  Vehicle Assessment: \$ \_\_\_\_\_

**Exemption for vehicle owned by active duty service member** Approved  Denied

Reason for denial: \_\_\_\_\_

\_\_\_\_\_  
Signature of Assessor

\_\_\_\_\_  
Date Signed

Vehicle leased by active duty service member - Assessor's calculation of refund amount(s)

Town  Lesser Taxing District  \_\_\_\_\_  
District Name

Assessment X Town Mill Rate: \$ \_\_\_\_\_ Assessment X District Mill Rate: \$ \_\_\_\_\_  
Town Refund Amount District Refund Amount

Refund Approved  Denied  Reason for denial: \_\_\_\_\_

\_\_\_\_\_  
Signature of Assessor and Date Signed  
Certification of refund amount(s)

\_\_\_\_\_  
Signature of Tax Collector/District Clerk and Date Signed  
Certification that vehicle tax has been paid