

PROPERTY TAX EXEMPTION APPLICATION FOR A NEW COMMERCIAL TRUCK, TRUCK TRACTOR, TRAILER OR SEMITRAILER

Any person seeking a property tax exemption for an eligible commercial vehicle must file this form together with all required documentation on or before November 1, with the Assessor(s) of the town where the vehicle is subject to property taxation. A separate form must be filed for each tractor-trailer unit or each portion of such a unit (i.e., only one motorized unit and one towed element can be listed on a single form). Failure to file by November 1, constitutes a waiver of the right to the exemption for the assessment year unless a filing date extension is granted by the Assessor pursuant to CGS §12-81k.

Important: There are two categories under which your vehicle may qualify for exemption. Review eligibility requirements and definitions on reverse side of form prior to completing this application. Incomplete applications (i.e., those on which all the required information is not supplied, or those for which the required supporting documentation is not attached) cannot be processed by the Assessor(s).

INSTRUCTIONS: Print or type a response to each question, entering N/A (for not applicable) where appropriate. If you complete this application on behalf of the vehicle's owner, enter your telephone number. Although you may regard the vehicle as a single tractor-trailer unit, information must be separately supplied for the motorized and towed elements since the value of each must be individually determined. If space constraints do not allow you to answer a question completely, attach an additional sheet(s) that includes the name of vehicle owner(s), vehicle identification number, the question and your response. Sign the application and retain a copy for your records. Submit the original to the Assessor(s) together with a copy of the required documentation, consisting of: (1) a copy of a validated *Form H-13 -- Application for Registration of a Motor Vehicle and Certificate of Title*, as issued by the Connecticut Department of Motor Vehicles (DMV), which has a seal affixed to it and a DMV date-stamp in the upper right-hand corner; (2) a copy of the vehicle's bill(s) of sale or invoice(s); and (3) proof of the price paid for any modification(s) made to the vehicle between the date it was purchased and October 1.

SECTION I -- VEHICLE OWNER / USE						
Name of vehicle owner(s) or registrant (if different)		Address (number and street)		Town	State	Zip Code
Person completing this form, if other than owner/registrant		Relationship	Tel. No.	Is the vehicle(s) listed below used by a "For Hire Motor Carrier"? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If No, describe vehicle user's business		Is the vehicle(s) listed below leased or rented? Yes <input type="checkbox"/> No <input type="checkbox"/>		Name of lessee and/or sub-lessee (i.e., end user)		
Lessee/sub-lessee address (number and street)		Town	State	Zip Code	Tel. No.	
Is the vehicle(s) listed below used <i>exclusively</i> for transporting freight for hire? Yes <input type="checkbox"/> No <input type="checkbox"/>		If Yes, describe freight transported				

SECTION II -- TRUCK / TRUCK TRACTOR					
Vehicle Identification Number (VIN)		Date Acquired	Purchase Price (excluding trade-in) \$		GVWR
Date Registered	Vehicle Registration (Plate) No.	Year	Make	Model	Body style
Sleeper cab Yes <input type="checkbox"/> No <input type="checkbox"/>		Engine Size	Engine Type	No. of axles	Fuel Type
Modified prior to 10/1? Yes <input type="checkbox"/> No <input type="checkbox"/>		If Yes, describe modification(s) made and enter cost of modification(s) excluding sales tax.			

SECTION III -- TRAILER / SEMITRAILER					
Vehicle Identification Number (VIN)		Date Acquired	Purchase Price (excluding trade-in) \$		GVWR
Date Registered	Vehicle Registration (Plate) No.	Year	Make	Model	
Body style		Open <input type="checkbox"/> Enclosed <input type="checkbox"/>	Refrigeration Yes <input type="checkbox"/> No <input type="checkbox"/>	Length	No. of axles
Modified prior to 10/1? Yes <input type="checkbox"/> No <input type="checkbox"/>		If Yes, describe modification(s) made and enter cost of modification(s) excluding sales tax.			

I do hereby declare under penalty of false statement that the information contained herein is true and complete to the best of my knowledge, remembrance and belief and that the vehicle listed above, together with any attachments thereto, is eligible for a property tax exemption pursuant to CGS §12-81(74).

Signature _____

Date Signed _____

For Assessor's Use Only							For OPM Use Only
	Cost of Vehicle	Modification Cost	Total Cost	X %	Depr. Cost	Assessment	
Truck/truck tractor							
Trailer/semitrailer							
TOTAL							
Exemption approved Yes <input type="checkbox"/> No <input type="checkbox"/>							
Regular List <input type="checkbox"/> Supplemental List <input type="checkbox"/>							
Approved by: _____							