## Motor Vehicle Property Tax Exemption or Benefit Application for Connecticut Resident on Active Military Duty

<u>Under Connecticut state law, CGS 12-81(53)</u>, one passenger motor vehicle belonging to, or held in trust for, any member of the <u>United States armed forces is exempt from taxation</u>. Application must be filed "not later than the thirty-first day of December next following the date on which property tax is due in such assessment year", (e.g. MV taxes due in July 2021 exemption must be claimed on or before December 31, 2021). Any serviceman who does not file a written exemption application within the time specified waives his right to claim the exemption for that assessment year.

1. Applicant's Name (Last, First):					2. Spouse's Name (Last, First):					
3. My legal residence as of <b>October 1</b> , <b>20</b> was:					4. My mailing address is:					
5a. On October 1, 20   United States Army (Active Duty)   Connecticut National Guard: Army National Guard  1 United States Army (Active Duty)   United States Army Reserve   United States Marine Corps (Active Duty)   United States Navy Reserve   United States Navy Reserve   United States Navy Reserve   United States Navy Reserve   United States Marine Reserve   United States Army Reserve   United States Marine Reserve   United States Army Reserve   United States Marine Reserve   United States Coast Guard Reserve   United States Air force Res										
5b. My duty location as of October 1, 20 was:  (This field must be completed)										
MOTOR VEHICLE INFORMATION (Each applicant is eligible for only one motor vehicle exemption)										
6. Year 6a. Make 6b. Model			, , , , ,	6c. Vehicle Identification Number				6d. License	Plate	
7. On October 1, <b>20</b> , the above listed motor vehicle was:  Owned by me (If owned, skip Lines 8 through 9 and complete Lines 10 through 11)  Leased by me (If leased, attach a copy of the signed lease and complete Lines 8 through 11)										
LEASE INFORMATION (Attach a copy of the signed lease)										
8. Lease Period		8a. Lessor's Name					8b. Lessor	's Address		
9. If a refund is due, it should be sent to me at the following address:										
AFFIDAVITS										
10. Applicant's Affidavit and Signature  I hereby claim a motor vehicle tax exemption and/or refund for one motor vehicle pursuant to C.G.S. 12-81(53)(a) or (b). All information herein provided is true and accurate to the best of my knowledge and belief.										
Applicant's Signature				Prin	t Name			Date Signed		
11. Commanding Officer's Affidavit and Signature  All information herein provided is true and accurate to the best of my knowledge and belief.										
Commanding Officer's Signature Print Name				Rank	_	Telephone Numb	er	Date Signed		
THIS FORM MUST BE FILED ANNUALLY AND NO LATER THAN DECEMBER 31st.  FAILURE TO FILE BY THE ABOVE DEADLINE CONSTITUTES A WAIVER OF THE RIGHT TO CLAIM SAID EXEMPTION										
12. TAX COLLECTOR: CERTIFICATION OF A TAX REFUND [12-81 (53) (b)]										
12a. LIST NUMBER 12b. VEHICLE ASSESSMENT 12c.			12c. M	ILL RATE	L RATE 12d. REFUND AMOUNT (LINE 12b TIMES LINE 12c)					
ASSESSOR'S I am satisfied that the above named applicant meets all the necessary statutory requirements										
AFFIDAVIT This claim is disallowed for the following reason										
SIGNATURE OF ASSESSOR OR MEMBER OF ASSESSOR'S STAFF:  Date Signed (Mo., Day, Yr)										

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