



CITY OF MERIDEN
Department of Finance
Office of the Assessor

142 East Main Street
Meriden, CT 06450

Income & Expense Appeal Form
June 1, 2024 Filing Period

Location of Property
Account Number
Property Owner
Mailing Address
City State Zip
Phone number

Please state reason the form was untimely, incomplete, or not filed. Your explanation should demonstrate good cause for the omission.

Four horizontal lines for providing an explanation.

A completed 2023 Income and expense form must be attached for assessor's consideration of penalty removal.

ORIGINAL APPEAL FORM and REQUIRED DOCUMENTS MUST BE "RECEIVED" BY THE ASSESSOR'S OFFICE NO LATER THAN THE CLOSE OF BUSINESS ON SEPTEMBER 30, 2024 IN ORDER FOR YOUR APPEAL TO BE CONSIDERED.

I do hereby declare under oath that I am the owner of the aforementioned property and that the information contained here is a true statement.

Signature of property owner Date

Subscribed and sworn to, before me, this ___ day of ___, 2024

Notary Public
My commission expires

Assessors Use Only
Appeal Approved ___ Denied ___
Assessor Signature Date