

Town of Wallingford

45 South Main St. Wallingford, CT 06492-4201
Phone (203)294-2001 / Fax (203)294-2003

Town of Wallingford
Assessor's Office
45 South Main St.
Wallingford, CT 06492-4201

2020 Declaration of Personal Property – MV / CAMPER FORM Wallingford, 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 2, 2020**

Extension: The Assessor may grant a filing extension *for good cause* (CGS §12-42 & 12-81K). If a request for an extension is needed, you need to **request the filing extension in writing on or before November 2 (PA 19-200)**.

Monday, November 2, 2020

If you no longer own the personal property assessed in your name last year or moved the property out of Wallingford, 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.

AFFIDAVIT OF SALE OF PERSONAL PROPERTY

I _____ of _____
Owners name Mailing Address City, State, and Zip

With regards to personal property do so certify that on _____ Date Said property was (indicate which one by circling):

SOLD TO:

And/Or

MOVED TO:

Name

City/Town and State to where camper was moved

Address

Address

The signer is made aware that the penalty for making a false affidavit is a \$500.00 fine or imprisonment for one year or both.

Signature

Print name

2020 Personal Property Declaration – Motor Vehicle Form

For Owners of non-Connecticut registered vehicles such as camping type vehicles not registered in Connecticut

| | |
|-----------------------------|----------------------------------------------|
| List or Account #: _____ | Assessment date October 1, 2020 |
| Owner's Name: _____ | Required return date November 2, 2020 |
| Address _____ | Location of personal property _____ |
| City/State/Zip _____ | |
| Phone / Fax () / () _____ | E-Mail _____ |

| Taxable Property Information | ASSESSOR'S USE ONLY | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|----|------|---------------|-------|-------|
| copy and attach additional sheets if needed | | | | | | |
| #9 MOTOR VEHICLES Unregistered motor vehicles (e.g. campers, RV's, snowmobiles, trailers, trucks, passenger cars, tractors, off-road construction vehicles, etc.) including any vehicle garaged in Wallingford but registered in another state or another Connecticut town, or any such vehicle not registered. | | | | | | |
| Describe your personal property located in Wallingford below: | | | | | | |
| Campground name: _____ | Campground Site # _____ | | | | | |
| At campground from _____ to _____ | Property there year round <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Vehicle type: <input type="checkbox"/> Camp Trailer <input type="checkbox"/> Travel Trailer <input type="checkbox"/> Park Model <input type="checkbox"/> Motor Home <input type="checkbox"/> Fifth Wheel (check all boxes that apply) <input type="checkbox"/> Pick-up Camper, slide-on <input type="checkbox"/> Pick-up Camper, chassis- <input type="checkbox"/> Slide Outs | | | | | | |
| Vehicle Description and Information Year _____ Make _____ Model # _____ VIN _____ | | | | | | |
| Model Name: _____ Make of engine: _____ Make of chassis _____ | | | | | | |
| Length: _____ Width: _____ Purchase date: _____ Purchase price: _____ | | | | | | |
| Registered: <input type="checkbox"/> Yes <input type="checkbox"/> No Marker #: _____ Where registered: _____ | | | | | | |
| IF REGISTERED IN ANOTHER CONNECTICUT TOWN OR OUT-OF-STATE YOU MUST PROVIDE A COPY OF THE CURRENT REGISTRATION | | | | | | |
| VALUE \$ _____ | #9 | | | | | |
| Site and Non-registered Motor Vehicle Information: | | | | | | |
| Improvement | Yes | No | Size | Wood or Metal | VALUE | #24 |
| Deck | | | X | | | |
| Screen porch | | | X | | | |
| Sun Room (with windows) | | | X | | | |
| Canopy (not awnings) | | | X | | | |
| Shed | | | X | | | |
| Non-registered MV | Yes | No | Year | Make | Model | VALUE |
| Golf Cart | | | | | | |
| ATV | | | | | | |
| Motorcycle | | | | | | |
| Motor scooter | | | | | | |
| Other (describe) | | | | | | |
| Subtotal > | | | | | | |
| #25 – Penalty for failure to file as required by statute – 25% of assessment | | | | | | #25 |
| Assessor's Final Assessment Total > | | | | | | |

Personal Property Declaration Affidavit

This form must be signed (and in some cases witnessed) before it may be filed with the Assessor.

Avoid Penalty - Notarize Personal Property Declaration signed by agent.

I DO HEREBY declare under penalty of false statement that all sections of this declaration have been completed according to the best of my knowledge, remembrance, and belief; that it is a true statement of all my personal property liable to taxation; and that I have not conveyed or temporarily disposed of any estate for the purpose of evading the laws relating to the assessment and collection of taxes.

Owner's Signature

_____ Date _____
 Owner's Signature (print owner's name on line below)

Print or type owner's name

I DO HEREBY declare under oath that I have been duly appointed agent for the owner of the property listed above and that I have full authority and knowledge sufficient to file a proper declaration for him in accord with the provisions of §12-50 C.G.S.

Agent's Signature

_____ Date _____
 Agent's Signature (print agent's name on line below)

Print 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

The Personal Property Declaration must be signed above and delivered to the Wallingford Assessor or postmarked (as defined in C.G.S. Sec 1-2a) by **Monday, November 2, 2020**– a 25% Penalty required for failure to file as required.

Please deliver to: Town of Wallingford, Assessor's Office, 45 South Main St. Wallingford, CT 06492-4201