



Office of the Assessor

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David Wheeler, CCMA II
Town Assessor

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Deputy Assessor

APPLICATION FOR ANTIQUE, RARE OR SPECIAL INTEREST MOTOR VEHICLE PURSUANT TO SECTION 14-1 AS AMENDED BY PA 08-150

Under new state law PA 08 – 150 all vehicles that are over 20 years old can be consider to be valued at 500 assessment dollars providing that the below application is completed in its entirety and meet the definition under section (3) "Antique, rare or special interest motor vehicle" means a motor vehicle twenty years old or older which is being preserved because of historic interest and which is not altered or modified from the original manufacturer's specifications;". **Failure to file this form by January 6th, 2022 will result in your vehicle being valued at average retail value based on NADA values according to state statutes for the 2021 Grand List.**

Please note this form must be signed by an Authorized Repair Mechanic to be Valid.

OWNER INFORMATION

OWNER'S NAME	<div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between;"> FIRST NAME MIDDLE INITIAL LAST NAME </div>		
OWNER'S MAILING ADDRESS	<div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between;"> STREET NUMBER/STREET NAME TOWN/CITY ZIP CODE </div>		
OWNER'S TELEPHONE NUMBERS	<div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between;"> TELEPHONE NUMBER CELL NUMBER FAX NUMBER </div>		

MOTOR VEHICLE INFORMATION

YEAR	MAKE	MODEL	VEHICLE IDENTIFICATION NUMBER
LIST AND DESCRIBE ANY AND ALL ALTERATIONS AND/OR MODIFICATIONS FROM THE ORIGINAL MANUFACTURER'S SPECIFICATIONS: <div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px;"></div>			

(Complete Other Side)

THE FOLLOWING QUESTIONS MUST BE ANSWERED

(IF MORE SPACE IS NEEDED, ATTACH A SEPARATE SHEET)

1. IS THIS MOTOR VEHICLE 20 YEARS OR OLDER?	<input type="checkbox"/> NO	<input type="checkbox"/> YES
2. IS THIS MOTOR VEHICLE BEING PRESERVED? IF YES, THEN EXPLAIN HOW?	<input type="checkbox"/> NO	<input type="checkbox"/> YES
3. IS THERE A HISTORICAL USE FOR THIS MOTOR VEHICLE? IF YES, THEN EXPLAIN HOW?	<input type="checkbox"/> NO	<input type="checkbox"/> YES
4. HAS THIS MOTOR VEHICLE BEEN ALTERED OR MODIFIED FROM THE ORIGINAL MANUFACTURERS SPECIFICATION? IF YES, THEN EXPLAIN HOW?	<input type="checkbox"/> NO	<input type="checkbox"/> YES

Affidavit

The applicant acknowledges that all of the above statements are true and complete. The applicant of a false affidavit/statement shall be subject to such fines, penalties and/or imprisonment as provided by law. My signature signifies that this affidavit has been read and understood.

SIGNATURE OF OWNER_____
PRINT NAME_____
DATE SIGNED

Subscribed and sworn to before me: _____

NOTARY PUBLIC_____
DATE SIGNED**Auto Mechanic Affidavit**

I have inspected the above vehicle at the owners request and have determined that the above vehicle has been altered or modified from the original manufacturer's specifications. ☐ NO ☐ YES

SIGNATURE AUTO MECHANIC INSPECTOR_____
PRINT NAME_____
LICENSE #_____
COMPANY NAME_____
ADDRESS_____
PHONE #_____
DATE SIGNED**FOR ASSESSOR'S OFFICE USE ONLY**This application is ☐ Approved ☐ Denied Grand List of October 1, 2021

The reason for denial: _____

SIGNATURE OF MEMBER OF ASSESSOR'S OFFICE_____
PRINT NAME_____
DATE SIGNED**Deadline for Application is January 6th, 2022**