Application to the Assessor for Exemption of Farm Machinery, Horses or Ponies

This application for exemption on all farm machinery, including tractors and other machinery, with the exception of motor vehicles as defined in Section 14-1, up to the assessed value of $250,000, ponies or horses which are actually and exclusively used in farming, within the provisions of Section 12-91 of the Connecticut General Statutes as amended must be filed ANNUALLY by November 2nd with the assessor or board of assessors in the municipality in which the property is located. Failure to file this application with the Assessor within the time limit prescribed shall be considered a waiver of the right to such exemption for the assessment year.

NAME: *(Name of Owner(s) or Trustee(s)*	FARM NAME/ PROPERTY ADDRESS:
PHONE NO:	E-MAIL:
MAILING ADDRESS: *(Number and Street or P.O. Box)*	*(Town/City)* *(State)* *(Zip Code)*

Town(s) in which the farm machinery, horses or ponies are located:

Machinery, horse or pony description	Year (or age, if horse or pony)	Make/Model (description, if horse or pony)	Purpose/ Farming use

Have you filed, or do you intend to file, any application for exemption as provided under the above statute, in this or any other town or city, as trustee, as an individual farmer, or as a member of a group of farmers, partnership or family corporation, other than under the ownership contained in this application? YES ☐ NO ☐

Do you derive at least $15,000 in gross sales, or did you incur at least $15,000 in expenses related to such farming operation during the previous calendar year? YES ☐ NO ☐

Are the horses or ponies, and/or farm machinery kept within the State of Connecticut? YES ☐ NO ☐

I DO HEREBY declare in accordance with Section 12-91 of the CT General Statutes under penalty of perjury that the statements herein made by me are true according to the best of my knowledge and belief.

DATE:	SIGNED: (*owner(s) or trustee*(s) **X**		
Subscribed by Sworn To before me:	DATE:	SIGNED: (Notary Public) X	*My Commission expires:*
DATE:	SIGNED: (*Assessor(s)*)		

NOTE: ATTACH ADDITIONAL SHEETS IF NECESSARY