



**TOWN OF MONROE  
ASSESSORS OFFICE  
7 FAN HILL RD  
MONROE, CT 06468-1800  
Pho: (203) 452-2803  
Fax: (203) 452-2253  
Email: rcaiola@monroect.org**

Dear Serviceman:

Enclosed please find an **Application for Motor Vehicle Property Tax Exemption.**

In order for this office to exempt your motor vehicle, we must have a copy of your military identification presented with this application. You must be active duty as of the assessment date October 1<sup>st</sup>.

**This application must be filed no later than the 31<sup>st</sup> day of December in the year in which the tax is due.**

If you have any questions, please do not hesitate to contact our office.

Thank you for your service.

Assessor's Office  
Town of Monroe

Non-Resident Affidavit For Property Tax Exemption In  
The State of Connecticut  
Under The Federal Service Members' Civil Relief Act Per SCRA

Name (Last, First):

I, \_\_\_\_\_,  
(Last name/First name/Middle initial) (Rank) (Branch) (Date of Birth)

hereby claim an exemption from personal property taxation in accordance with the provisions of §574 of the Service Members' Civil Relief Act of 1940, as amended. Having been duly sworn, I depose the following in support of my claim:

- On or after October 1, \_\_\_\_\_ (hereinafter referred to as the assessment date), I was an active duty member of the United States Armed Forces, attached to the following duty station in Connecticut: \_\_\_\_\_.
- I reported to my present duty station in Connecticut on or about \_\_\_\_/\_\_\_\_/\_\_\_\_ (mo/day/yr), and anticipate that my present tour of duty assignment at that station will be completed on or about \_\_\_\_/\_\_\_\_/\_\_\_\_ (mo/day/yr).
- My presence in Connecticut on the assessment date was solely as a result of my official military orders. Yes  No   
If 'No', explain \_\_\_\_\_.
- My home of record or permanent address as shown in my military records is in the State of \_\_\_\_\_.
- I have retained my domicile in said State without interruption throughout my service in the Armed Forces. Yes  No   
If 'No', explain \_\_\_\_\_.
- It is now, and was on the assessment date, my intention to return to the State of my domicile upon my separation or retirement from the United States Armed Forces. If 'No', explain Yes  No  \_\_\_\_\_.
- On the assessment date, I lived in the State of Connecticut at \_\_\_\_\_  
(Number, Street and City/Town)
- My current address is the same as on the assessment date. Yes  No   
If 'No', current address: \_\_\_\_\_.
- I am (and was) married on the assessment date. Yes  No  If yes, Spouse's name \_\_\_\_\_
- On the assessment date, I (and/or my spouse) owned the personal property described below, which was located in the City/Town of \_\_\_\_\_, Connecticut.

Note: With respect to 'Ownership', please enter the following code(s), as applicable:

- S - for property owned solely by serviceman;
- SP - for property owned solely by serviceman's spouse; or
- J - for property jointly owned by serviceman and his/her spouse.

MOTOR VEHICLE (including unregistered snowmobiles)		
Year, Make and Model	State & Plate #	Ownership

\_\_\_\_\_  
Signature of Affiant

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

**PLEASE ATTACH A CURRENT LEAVE & EARNINGS STATEMENT TO THIS AFFIDAVIT.**

Subscribed and sworn to me this \_\_\_\_ day of \_\_\_\_\_.

My Commission expires: \_\_\_\_\_

(for office use only)

Eligible through Grand List Year of: