

November 2022

To all owners of motor vehicles currently registered in the Town of Bolton that are adapted for persons with a disability

The Town of Bolton has an ordinance exempting certain vehicles specially adapted for persons with disabilities. The ordinance was adopted at the May 18, 1999 Board of Selectmen meeting, and became effective June 22, 1999:

Pursuant to Section 12-81c of the Connecticut General Statutes, an exemption from personal property taxation is created for an ambulance type motor vehicle which is used exclusively for the purpose of transporting medically incapacitated individuals or for a specially rigged, privately owned vehicle operated by a handicapped individual. Excluded from this exemption are any vehicles used to transport individuals for payment. Taxpayers seeking such exemption must provide proof to the town assessor that the vehicle is modified for use by a handicapped individual or for the transport of a handicapped individual. In addition, the town assessor may require medical documentation verifying that the modifications to the vehicle are directly related to the medical incapacity of the individual. Such exemptions shall expire upon transfer in ownership of the vehicle.

The key eligibility criteria are:

- the vehicle must be registered with the CT Department of Motor Vehicles and must most frequently leave from and return to a property located in the Town of Bolton, Connecticut;
- the vehicle cannot be used to transport any individual for payment;
- the vehicle must be inspected by the assessor before the exemption is granted. The assessor may inspect the vehicle at least once every Grand List year but is not required to.

An application is available in the Assessor's Office and on the Assessor's page of the town website. If you have any questions, please call the office at 860-649-8066-6102, email assessor@boltonct.org or stop in.

**APPLICATION FOR EXEMPTION OF CERTAIN MOTOR VEHICLES
SPECIALLY ADAPTED FOR PERSONS WITH DISABILITIES pursuant to CGS §12-81c**

FILING PERIOD: BY JANUARY 31 FOLLOWING THE OCTOBER 1 ASSESSMENT DATE
If the vehicle is purchased after 1/31, application must be made by the next October 1 assessment date

Pursuant to the authority granted by CGS §12-81c and adopted as a local ordinance at a Board of Selectmen Regular Board meeting on 9/5/1985, I make application for the exemption of one "ambulance-type motor vehicle which is used exclusively for the purpose of transporting any medically incapacitated individual." A copy of the ordinance was received by the applicant. I have included proof of the vehicle's eligibility.

Vehicle owner's name _____

Vehicle owner's mailing address _____

Address of location the vehicle most frequently leaves from and returns to _____

Address of person being transported with vehicle _____

Is the vehicle registered? Y____N____. If yes, what is the plate number _____

What is the VIN _____

Describe modifications made to vehicle. _____

Cost of modifications (attach invoice or proof) _____

Do you receive payment or services in exchange for transport with this vehicle? Y____N_____

I CERTIFY UNDER THE PENALTIES OF FALSE STATEMENT THAT I MEET THE REQUIREMENTS OF CONNECTICUT GENERAL STATUTES §12-81c(3) AND AM ENTITLED TO THE TAX EXEMPTION PROVIDED FOR THEREIN

Signature of Applicant

Date

Print Applicant's Name

Phone Number

For Assessor's Use Only

Proof of the vehicle's eligibility:

1) Dated copy of the invoice showing modifications made to the vehicle _____

2) Valid special license plate for the disabled issued by the CT DMV _____

3) Letter from a physician or a licensed health care professional _____

4) Other _____

Date Received _____

Date Vehicle Inspected _____

Approved Y _____ N _____

Reason for denial _____

Initial Vehicle assessment _____