

**Town of Montville**  
**Assessor's Office**  
310 Norwich-New London Tpke.  
Uncasville, CT. 06382  
860-848-3030 ▪ Fax 860-848-4078  
E-mail: [assessor@montville-ct.org](mailto:assessor@montville-ct.org)

**APPLICATION FOR BLIND EXEMPTION**

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town/State/Zip: \_\_\_\_\_

Attached is my certification of legal blindness from the State of Connecticut, Board of Education and Services as defined in CGS §12-94. I understand that the exemption is for \$3,000 off the property assessment. Please place the exemption on:

Motor Vehicle: \_\_\_\_\_

Year	Make	Model	VIN
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Real Estate at: \_\_\_\_\_

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Signature of applicant or authorized agent

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Signature of the Assessor

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Date of Application