

INSTRUCTIONS. To apply for an abatement (or refund if excise has been paid), complete this form and provide the specified documentation.

Abatement application **must** be received by the assessors within three years after the excise was due, or one year after the excise was paid, whichever is later. To preserve your right to appeal, you must file on time. By law, assessors may only act on late applications in limited circumstances where the excise is still unpaid and their decision in those cases is final.

Filing an application does not stay the collection of your excise bill. To avoid interest, charges and collection action, including non-renewal of your registration, you must pay the bill in full within 30 days of its issue date. You will receive a refund if an abatement is granted.

NOTE. You are not entitled to an abatement if you (1) cancel your registration and retain ownership of the vehicle, or (2) move to another Massachusetts City or town, during the calendar year. No excise may be reduced to less than \$5.00. No abatement or refund of less than \$5.00 may be made.

Return this completed form to:
Wilbraham Board of Assessors
 240 Springfield Street Wilbraham MA 01095

Board of Assessors at (413) 596-2800 x 209
Fax (413) 596-2820
 Do not write below this line

Cal. Year _____ Bill # _____

Valuation _____ Months assessed _____

Original Excise \$ _____

Abatement allowed \$ _____

Adjusted Excise \$ _____

Cert. # _____ Date: ____/____/____

Assessor _____

Assessor _____

Assessor _____

TOWN OF WILBRAHAM MOTOR VEHICLE EXCISE ABATEMENT APPLICATION

General Laws Chapter 60A

BILL INFORMATION:

Tax Year _____ Tax Date ____/____/____ Issue Date ____/____/____ Bill Number _____

Plate/Registration Number _____ VIN _____ Vehicle Year _____ Make _____

Name (as shown on bill) _____

Address (as shown on bill) _____
City/Town State Zip

Mailing Address (if different) _____
City/Town State Zip

REASON YOU ARE APPLYING FOR AN ABATEMENT:

- | <u>Check where applicable</u> | <u>You must provide this documentation</u> |
|--|--|
| <input type="checkbox"/> Vehicle sold or traded | 1. Bill of sale <u>or</u> Name and address of the person you transferred the vehicle to
2. Plate return receipt from Registry of Motor Vehicles (RMV) <u>or</u> new registration if plate was transferred to another vehicle. |
| <input type="checkbox"/> Vehicle stolen or total loss | Police report or insurance settlement letter <u>and</u> plate return receipt, C-19 Form (Affidavit of Lost or Stolen Plate from RMV) or new registration form |
| <input type="checkbox"/> Vehicle repossessed or junked | Notice from lienholder or receipt from junk yard <u>and</u> plate return receipt, C-19 Form or new registration form |
| <input type="checkbox"/> Vehicle returned (Lemon Law) | Letter from dealer certifying return <u>and</u> plate return receipt or new registration form |
| <input type="checkbox"/> Moved from Wilbraham Before January 1 of tax year | Date of move: ____/____/____
Copy of your Insurance Coverage Selection Page showing your principal place of garaging |

NOTE: You must notify the RMV within 30 days of moving and before January 1 to be billed by your new city or town next year.

- | | |
|---|---|
| <input type="checkbox"/> Moved from Massachusetts | Date of move: ____/____/____ Please provide copies of both the NEW STATE REGISTRATION & the PLATE RETURN RECEIPT from the MA Registry of Motor Vehicles |
| <input type="checkbox"/> Garage Code Incorrect | Vehicle is garaged in the City / Town of _____
Please provide Insurance Coverage Selection Page |
| <input type="checkbox"/> Exemption | Type: _____ Documentation establishing qualifications |
| <input type="checkbox"/> Other | Explain: _____ Relevant documentation |

Subscribed under the penalties of perjury

Signature: _____ Date: _____

Telephone: _____(Day) _____(Night)