



TOWN OF DARIEN

Confirmation of Ownership for Emergency Service Workers Tax Credit

Please complete this form and return to the Assessor's Office by March 15th

Completed forms may be emailed to: mmillan@darienct.gov

Completed forms may also be mailed to: Town Assessor's Office
Darien Town Hall, Room 102
2 Renshaw Rd
Darien, CT 06820

Department:

Full Name:

Date of Birth:

Social Security Number *(only required for first time receiving a credit):*

You may also provide your SSN by calling the Darien Finance Department at 203-656-7334

Real Estate Ownership Confirmation

I, hereby confirm that I own property located at the following address:

Motor Vehicle Ownership Confirmation

(This section is not required if real estate ownership was confirmed above)

I hereby confirm that I own the following motor vehicles:

License Plate #	Registration Address	Car Leased? Yes/No

Signed _____

Date: _____

Contact information
(phone # & email address)

Mailing address *(if different than above):*

The amount of your tax credit is considered taxable income and will be reported on a W2.