## UPDATE REPORT OF SPECIAL TAX DISTRICT

nicipality Nam	e:	Dis	trict Name:		
Pursuant to S	E OF CONNE	TURN TO TOWN/CCTICUT OFFICE ( The Connecticut Gentlem town such district in such district is	OF POLICY ANI neral Statutes, the s located any time	MANAGEMENT clerk of the district	
District Business	s Address:	such district is	Type of District:	(select one)	
			Improvement □ Beach □		ee 🗆
Town or City:Zip:			Other (specify)		
(submit new do	ecuments with fo		s of Incorporation □ tution or Charter □ nce(s) □	l By Laws □ Special Act □	
	Name:	Address (inclu	de zip):	Email:	Telephone
President or Chairman: Vice President:					
Secretary:					
District Clerk:					
Treasurer:					
Tax Collector:					
Board of Directors/ Commissioners/ other:	Name:	Address (inclu	de zip):	Email:	Telephone:

Completed by:	Title:	Date:
Signature:	_	

## RETURN FORM AND ATTACHMENTS TO:

- Town or City Clerk
- State of Connecticut
   Office of Policy and Management
   450 Capitol Avenue, MS #54SLP
   Hartford CT 06106
   <u>OPMIGPP@ct.gov</u>

Recommended by State of Connecticut Office of Policy and Management Rev. 2025 M-20a Update