



**TOWN OF WESTBROOK
ASSESSOR'S OFFICE
860-399-3016
FAX 860-399-3098**

TO: WESTBROOK ASSESSOR

**RE: APPLICATION FOR EXEMPTION DUE TO BLINDNESS
TO BE FILED BEFORE 10/1 FOR BENEFIT ON THE
FOLLOWING GRAND LIST YEAR**

CT STATE STATUTES (SEC 12-92) DEFINES BLINDNESS FOR
EXEMPTION PURPOSES AS FOLLOWS:

"TO MEAN TOTAL AND PERMANENT LOSS OF SIGHT IN BOTH EYES OR
REDUCTION IN VISION SO THAT THE CENTRAL VISUAL ACUITY DOES
NOT EXCEED 20/200 IN THE BETTER EYE WITH CORRECTING LENSES,
OR, IF VISUAL ACUITY IS GREATER THE 20/200, IT IS ACCOMPANIED
BY A LIMITATION IN THE FIELDS OF VISION SUCH THAT THE WIDEST
DIAMETER OF THE VISUAL FIELD SUBTENDS AN ANGLE NO GREATER
THAN TWENTY DEGREES."

THIS IS TO CERTIFY THAT

(NAME OF PATIENT)

HAS BEEN EXAMINED BY ME AND IN MY OPINION HIS/HER SIGHT
DEFICIENCY DOES FALL WITHIN THE ABOVE DESCRIBED
DESCRIPTION OF BLINDNESS.

FURTHER, THIS CONDITION HAS EXISTED SINCE _____
(YEAR)

(DATED)

(SIGNATURE OF DOCTOR)