

Assessment Year	_____
BOR Docket No.	_____
Certificate of Error	_____
Received By	_____

APPLICATION FOR SENIOR CITIZEN'S HOMESTEAD EXEMPTION

Application is hereby made for a Senior Citizen's Homestead Exemption to reduce the assessed value of the real property hereinafter described, on the grounds that the requirements of Chapter 35 ILCS 200/15-170 have been met as hereinafter more particularly set out.

PERMANENT INDEX NUMBER _____ - _____ - _____ - _____

OWNER/TAXPAYER _____ DATE OF BIRTH _____ / ____ / ____
Attach copy of proof of age such as driver's license, state id, or passport.

OWNER/TAXPAYER _____ DATE OF BIRTH _____ / ____ / ____
Apply even if you are not 65 Attach copy of proof of age such as , driver's license, state id, or passport.

Is the property owned in Trust? YES NO If yes, a copy of the trust indicating beneficiary and signatures is required.

RESIDENCE ADDRESS _____
Street City State Zip

SEND NOTICE TO
 (If different than above) _____
Street City State Zip

TELEPHONE NUMBER () _____

LEGAL OWNER OF RECORD OF PROPERTY (Assessed To) _____

IS THE APPLICANT THE OWNER OF RECORD OF THE ABOVE DESCRIBED PROPERTY? YES NO

IF **YES**, TITLE TO THE PROPERTY WAS ACQUIRED IN THE FOLLOWING MANNER:

- DEED: RECORDED DOCUMENT NO: _____
 INHERITANCE (Attach copy of Will) COURT ORDER (Attach Copy)

IF **NO**, DOES APPLICANT HAVE:

- BENEFICIAL INTEREST IN TRUST (**Attach copy of TRUST AGREEMENT or letter from bank or attorney**)
 LIFE ESTATE INTEREST (**Attach copy of DOCUMENT**)
 LEASEHOLD INTEREST (**Attach copy of LEASE**)
 CONTRACT FOR SALE (**Attach copy of CONTRACT**)

APPLICANT HAS OCCUPIED THIS PROPERTY AS HIS/HER PRIMARY RESIDENCE SINCE: _____
DATE

Owner/taxpayer states that no other application for Senior Citizen's Homestead Exemption has been or will be filed by him/her on any other real property in or outside the State of Illinois where such application also requires primary residency.

The Owner/taxpayer understands that a Senior Citizen's Homestead Exemption will continue provided all requirements continue to be met.

OWNER/TAXPAYER SIGNATURE _____ DATE _____

OWNER/TAXPAYER SIGNATURE _____ DATE _____