

# Application for Senior Citizens Homestead Exemption

Applicant Name (Last) First Initial (Please type or print)

Property Index Number (PIN #)

Township

Owners (or Lessee) Name(s) and Address

Legal Description

1. The undersigned states that he (she) is 65 years of age or older, having been born on \_\_\_\_\_  
Birth Date  
and that the above described real property is occupied as the principal residence by the undersigned.

Additional Owner Occupants: \_\_\_\_\_  
Name (spouse, brother, sister, co-owner) Birth Date

2. The senior citizen homestead exemption (35 ILCS 200/15-170) provides for an annual maximum reduction in the equalized assessed value of \$5,000 of the property that you (1) own or have a leasehold interest in, (2) occupy as your principal residence during the assessment year, and (3) are liable for the payment of the property taxes.

3. The undersigned also states that he (she) meets all three requirements in # 2 above. Proof of legal or equitable interest in the property as evidenced by a written instrument recorded in the Recorder's Office:

Doc #: \_\_\_\_\_ Dated: \_\_\_\_\_ If unrecorded, a copy of which is attached.

4. The undersigned also states that no other application for homestead exemption has been or will be filed by him (her) on any other real property in Illinois or elsewhere.

5. If this property was first occupied as a residence after January 1 of the year in which you are applying for this exemption, indicate below the date you moved into the property so that the exemption can be pro-rated:

Date property first occupied: \_\_\_\_\_

OWNER \_\_\_\_\_ Date: \_\_\_\_\_

## Office Use Only

Approved for \_\_\_\_\_  Pro-rated  Denied: \_\_\_\_\_