

PTAX-00 Application for Owner Occupied Homestead Exemption

Step 1: Complete the following information

1. _____
Property Owner's Name
- _____
Mailing Address
- City _____ State _____ Zip _____
() _____
Daytime phone
2. Write the assessment year for which you are requesting the owner occupied homestead exemption _____
3. Have you previously received an owner occupied exemption on this property
- Yes
 No (If no, have you previously received this exemption in Stephenson County or any other county or state)
 No
 Yes, at the following address:

4. _____
Name (if different than Owner)
- _____
Street address of property (homestead)
- City _____ State _____ Zip _____
() _____
Daytime phone
5. Write the property index number (PIN) of the property for which you are requesting the owner occupied exemption on Line a. Your PIN is listed on your property tax bill or you may obtain it from the chief county assessment officer (CCAO). If you are unable to obtain your PIN, write the legal description on Line B
- a PIN _____
- b _____

(attach separate sheet if needed)

Step 2: Complete eligibility information

6. Check type of residence
- Single-Family Dwelling Duplex (no lessee)
 Townhouse Condominium
 Apartment Other _____
7. Is the residence operated as a cooperative?
- Yes
 No
8. On January 1 were you the owner of record or did you have a legal or equitable interest in this property or did you have a life care contract with a facility under the Life Care Facility Act?
- Yes
 No
If No, write date you acquired an interest in this property:
_____/_____/_____

9. On January 1, did you occupy this property as your principal residence?
- Yes
 No
If No, write date you first occupied this property:
_____/_____/_____
10. On January 1 were you liable for payment of real estate taxes on this property?
- Yes
 No
11. On January 1 was this property being leased?
- Yes
 No

Step 3: Attach proof of ownership

12. Check type of documentation you are attaching as proof that you are the owner of record or have a legal or equitable interest in the property.
- Deed Contract for Deed
 Trust Agreement Life Care contract
 Lease
 Other written instrument (specify) _____

13. Write the date the written instrument was executed.
_____/_____/_____
14. Is the instrument recorded?
- Yes
 No
If Yes, write date recorded and the document number
_____/_____/_____
Document _____

Step 4: Sign below

I state that to the best of my knowledge, the information on this application is true, correct and complete.

I state that to the best of my knowledge, the information on this application is true, correct and complete.

Property owner or authorized representative
Date ____/____/_____

Lessee
Date ____/____/_____