



OFFICE OF THE
Algonquin Township Assessor

Richard S. Alexander, Assessor
Certified Illinois Assessing Officer

Application for General Homestead Exemption

Section 1: Instructions

A. Property eligibility:

- The property must be occupied as the primary residence by the eligible taxpayer.
- The eligible taxpayer must be liable for paying the real estate taxes on the property.
- The eligible taxpayer must own the property on record or have a legal or equitable interest in the property as evidenced by an official document. In the case of a leasehold interest in property, contact the Algonquin Township Assessor's Office for the correct application.

If a homestead exemption is granted under this Section and the person granted the exemption later becomes a resident of a facility licensed under the Illinois Nursing Home Care Act or the Illinois MR/DD Community Care Act, the exemption shall continue so long as the qualifying person's spouse occupies the residence or the residence remains unoccupied but is still owned by the person qualified for the homestead exemption.

B. **Application:** After initial approval, the exemptions will be automatically renewed. If the property no longer qualifies for qualified for the exemption, it is the taxpayer's obligation to remove the exemption to avoid potential interest and penalties.

C. **Exemption Amount:** Under 35 ILCS 200/15-175, qualified taxpayers are permitted an exemption that will remove up to \$6,000 from the equalized assessed value before taxes are calculated.

Section 2: Property Identification (please print)

Owner/Taxpayer Name(s): _____ Parcel No. ____ - ____ - ____ - ____ - ____

Mailing Address: _____ Property Address: _____

Mailing City, State, ZIP: _____ Property City, State, Zip: _____

Daytime Telephone: _____ I have owned and occupied this property since _____
mm/yyyy

Do you own any other real estate in the United States?

- Yes; the address of the real estate is _____
- No; this is the only property I/we own.

Section 3: Oath I attest that (applicant **must** check all applicable boxes)

- The above address was occupied by person(s) with legal or equitable interest as of January 1 of the current assessment year.

The above address has been my primary residence since the date noted in Section 2.

I am the owner of the record or have a legal or equitable interest in the property as evidenced by written instrument.

I am liable for paying the taxes on this property, from the date stated above.

Signature of Owner/Taxpayer _____ Date _____

***Please provide a proof of Residency (Current Driver's License or State Identification Card)**

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