# COOK COUNTY ASSESSOR | FRITZ KAEGI

# CERTIFICATE OF ERROR APPLICATION

The Certificate of Error process provides the homeowner an opportunity to redeem missing exemptions. Homeowners can now file for past exemptions for the 2023, 2022, 2021, and 2020 tax years.

STEP 1   Property Informa	ation
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STEP 1   Property Information		2020
Property Index Number (PIN)	Property Address	City
Name of Applicant	Phone Number Email Addre	ess
Mailing Address (If different from property address)	City State Zip Co	Date of Occupancy
Check the	box to receive news from the Assessor's Office	

### **Choose Eliqible Exemption(s) / Verify Required Documents**

Check-mark all missing exemptions and tax years for which you qualify and would like to apply. You may choose multiple exemptions and tax years.

Homeowner	<b>Exemption</b>
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TAX YEAR 2023 2022 2021 2020

- ✓ I occupied the property as my principal place of residence on or before January 1st of the application year(s) indicated.
- I am liable for the payment of this property's taxes.
- ✓ I own this property or have a legal, equitable, or leasehold interest in this property.

I hereby apply for the Homeowner Exemption

## **Persons with Disabilities Exemption**

TAX YEAR 2023 2022 2021 2020

- ✓ I was or became disabled during the tax year(s) indicated.
- ✓ I occupied the property as my principal place of residence on or before January 1st of the application year(s) indicated; or I was a resident of a life care facility licensed under the Nursing Home Care Act and my property remained unoccupied or was occupied by my spouse.
- I am liable for the payment of this property's taxes.
- I own this property or have a legal, equitable, or leasehold interest in this property.

#### I hereby apply for the Persons with Disabilities Exemption

#### **Required Documents**

One of the following documents must be provided with this application and must match the year(s) indicated. Check-mark the documentation you are including.

- Class 2 or 2A Illinois Disabled Person ID Card from the Illinois Secretary of State's Office.
- Proof of SSA Disability Benefits which includes: an award letter. verification letter, annual COLA letter. If you are under the age of 65 and receiving SSI disability benefits, include a letter indicating SSI payments.
- Proof of Department of Veterans Affairs disability benefits which includes an award letter or certification letter indicating you are receiving pension for a non-service connected disability.
- Proof of pension for non-military service connected disability. Proof of Railroad or Civil Service Disability benefits which includes an award letter or verification letter of
- total (100%) disability. If you are unable to provide proof of your disability listed on the
  - items above, you must submit Form PTAX 343-A, Physician's Statement for Proof of Disability, completed by a physician. [Note: You may also be required to be re-examined by an IDOR designated physician. You would be responsible for any cost incurred for your examination by any physician.]

#### Senior Exemption —

TAX YEAR 2023 2022 2021 2020

✓ I occupied the property as my principal place of residence during the year(s) indicated.

FOR OFFICE USE ONLY

2022\_\_\_\_\_\_

CofE Number

CofE Type

2021 \_\_\_

- ✓ I am liable for the payment of this property's taxes.
- ✓ I own this property or have a legal, equitable, or leasehold interest in this property.
- ✓ I was born in or before 1958. Enter date of birth: \_

MM/DD/YYYY

I hereby apply for the Senior Exemption

# **Veterans with Disabilities Exemption**

TAX YEAR 2023 2022 2021 2020

- ✓ I occupied the property as my principal place of residence during the application year(s) indicated.
- ✓ I have at least 30% service connected disability certified by the US Department of Veteran Affairs during the tax year(s) indicated.
- ✓ I am liable for the payment of this property's taxes.
- ✓ I own this property or have a legal, equitable, or leasehold interest in this property.
- ✓ I understand this exemption applies to the first \$250,000 of Equalized Assessed Value, after subtracting any part of the EAV of the property used for commercial purposes or rented for more than six months.
- I am an Illinois resident who has served as a member of the US Armed Forces on active duty or State active duty, in the Illinois National Guard or US Reserve Forces and I was honorably discharged.
- I am a non-remarried Surviving spouse of a disabled veteran; if YES, complete the following:

Deceased Disabled Veteran's Name

 Date	of	Death	-

MM/DD/YYYY

#### I hereby apply for the Veterans with Disabilities Exemption

#### **Required Documents**

Applicants must submit a certification letter from the VA that matches the year(s) for which you are applying and a DD214. Check-mark the documents you are including in this application.

- Disability certification or verification letter from the U.S. Department of Veterans Affairs (VA) stating the applicant [veteran] has a service-connected disability for the tax year being applied for. The document must specify the percentage of the service-connected disability and specify the effective date.
- Form DD214 or separation of service from the Defense Department. (military service prior to 1950), or Certification of Military Service Form.
  - A non-remarried surviving spouse of a disabled veteran applying for the first time or transferring the exemption must also provide their marriage certificate, the disabled veteran's death certificate, and proof of property ownership.

Senior Freeze Exemption —						
TAX YEAR 2023 ☐ 2022 ☐ 2021 ☐ 20  ✓ The Total Household Income at this property we less in the income year prior to the tax year(s) of the tax year(s) indicated and January 1 of the positive in this property or have a legal, equitable, of interest in this property January 1 of the tax year January 1 of the preceding year.  ✓ I was/am liable for the payment of this propert tax year indicated and preceding year.	vas \$65,000 or checked. nce on January 1 of preceding year. or leasehold ar(s) indicated and	Required Inco To be eligible for th spouse, and all pers must have had a co year prior to the tax applying for tax ye be listed. Complete tax year(s) and list principal residence YOU: OTHERS:	nis exempt sons using imbined in x year(s) ye ear 2022, t e this work the names	ion, the ho the prope come of \$6 ou are app chen incom sheet to d	usehold (applicant, erty as their princip: 65,000 or less durir lying for. For exam ne from calendar ye etermine your eligil sons who used this	applicant's al residence) ag the calendar ole, if you are ear 2021 must oility for each property as their
I hereby apply for the Senior Freeze Exemption						
THE INCO	ME VERIFICATION	BELOW MUST BE	COMPL	ETED -		
*If you were enrolled in any of the following pro for tax year 2023. Programs: AABD, SNAP, LIH						
Include the household total for all income ent	TAY	*2023 USE 2022 INCOME	<b>202</b> 2	2 🗌	2021 USE 2020 INCOME	<b>2020</b> USE 2019 INCOME
Social Security, SSI benefits. Include Medica	re deductions.					GGE EGIG II NGGIME
2. Railroad Retirement benefits.						
3. Civil Service benefits.						
<ul><li>4. Annuities, federally taxable pensions and retirement plan distributions.</li><li>5. Human Services and other governmental cas public assistance benefits.</li></ul>	sh					
6. Wages, salaries, and tips from work.						
7. Interest and dividends received.						
8. Net rental, farm, and business income (or los	s).					
9. Net capital gain (or loss).						
10. Other income (or loss).						
11. Subtotal: Add Lines 1 through 10						
12. Certain subtractions. You may subtract only t adjustments to income from U.S. 1040.	he reported					
13. <b>Total Household Income: Subtract Line 12 fr</b> If Line 13 is less than or equal to \$65,000, thi meets the income qualifications for the "Seni	is household					
STEP 3   Photo ID Required and	Proof of Occur	ancv	S1	<b>TEP 4</b>	Signature	1
All applicants must include Photo ID and an Occupancy Affidavit. The name and address on the ID must match what is entered on the application, and been issued before January 1 of the oldest tax year applied for. If your current name is different from a former name on any provided verification document(s) or the deed, you must submit documentation sufficient to explain the name change: a certified marriage certificate, divorce decree, etc. If you do not own the property, you must submit documentation showing a legal, equitable, or leasehold interest in the property.  Attach copies of one from List A or one from List B AND one from List C  Photo IDs that verify identity and occupancy in the tax year.  • Drivers License / IL ID Card • Matrícula Consular ID • City of Chicago ID Card				nformation a, correct and eemption is granted ct to a lien for back with Section 9-275 e (if any) have n on any		
If the address on your Photo ID doesn't reflect the provide one photo ID from List B and one documen  I L Drivers License / IL ID Card	nt from List C.	include the	_     "	Cook C 118 N. C	ounty Assessor Clark Street, Roon o, IL 60602	
B · IL Drivers License / IL ID Card · Matrícula Consular ID · City of Chicago ID Card	<ul> <li>Items in List C must property address an you are applying for.</li> </ul>	d reflect the tax yea	ar(s)	Applicant's	·	
US Passport US Military ID Card	<ul> <li>Bank statement</li> <li>Landline, cable, or</li> </ul>			Applicant's	Signature	
<ul><li>Certificate of Naturalization (N-550/N-570)</li><li>Permanent Resident Card (I-551)</li></ul>	<ul><li>Pay stub</li><li>Social Security Aw</li></ul>	ard Letter		Date		
<ul><li>Refugee Travel Document (I-571)</li><li>Employment Authorization (I-766)</li></ul>	<ul> <li>Voting record (from Office or Chicago B</li> </ul>		rs			

# COOK COUNTY ASSESSOR FRITZ KAEGI



COOK COUNTY ASSESSOR'S OFFICE 118 NORTH CLARK STREET, 3<sup>RD</sup> FLOOR CHICAGO, IL 60602 | PHONE: 312.443.7550 www.CookCountyAssessor.com

# **OCCUPANCY AFFIDAVIT**

Affiant's Name:	Phone #: ()	_
Affiant's Current Address:	(property address, city, state and zip code)	_
I,(Affiant's name)	, do hereby state under oath as follows:	
From to(date)	, I occupied as my principal residence	
the property commonly known as	(property address, city, state and zip code)	and
identified by Property Index Number(s)		_,
I swear that the facts stated above are true	•	se years.
Signature of Affiant (required)		

Updated March 23, 2020