COOK COUNTY ASSESSOR
FRITZ KAEGI

COOK COUNTY ASSESSOR'S OFFICE
118 NORTH CLARK STREET, CHICAGO, IL 60602
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WWW.COOKCOUNTYASSESSOR.COM

TERMINATION OF LEASE REPORTING FORM

_____ _____ _____
(name) *(title in organization)* *(name of exempt organization)*

I, _____, hereby affirm the following to be true and correct:

1. the exempt agency listed above is the owner of the premises commonly known as _____ and designated by PIN _____ (the subject property);

2. I have personal knowledge of the subject property;

3. I have personally viewed the subject property and am familiar with the financial dealings of the exempt organization listed above, including, but not limited to, all leased property of the exempt organization listed above;

4. Based on my familiarity of the financials of the exempt organization listed above and after having viewed the subject property on the date of _____, I swear that the premises are used exclusively by the exempt organization listed above and are not leased to any third party and no current plans exist to lease the property to any third party;

5. I understand and submit this affidavit to the Cook County Assessor's Office to induce the Cook County Assessor's Office to terminate the leasehold assessment for the tax year _____ on the subject property.

Signature: _____

Print Name: _____

Title: _____

Phone: _____

Date: _____