## Hours: 8:30 A M - 5:00 P M

Cook County Assessor's Office 118 N. Clark Street - 3rd Floor Chicago, Illinois 60602

Fritz Kaegi Cook County Assessor

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x Year 2023	Real Estate	Assessed	Valuation	Appeal

COOK COUNTY ASSESSOR APPEAL NUMBER	VACANT LAND

	riours.	0.30 A.W	3.00 i .ivi.						RECEIVED AND CHECKED BY	•		
			APPEAL FORM. TYPE O				RS OFFICE F	RULES AND	List in ascending order all P			ers
REGU	LATIONS IN FILLING (		G THIS FORM. IF AIR RI	<u> </u>					associated with the SUBJECT PROPERTY PERM		erty.  CERTIFICATE (	OE EDDOD
		IDENTIFICATION AND STATUS OF OWNER / TAXPAYER					INDEX NUMBER(S)	///	YEAR(: 2022 2021			
1	Name of Taynay	Name of Taypayar / Owner						1		2022   2021	2020	
		Name of Taxpayer / Owner Email						3				
	City State Zip Co											
							· —		4			
		Owner	Former Owner Liable for	· Tax Tenant	Liable for Tax	Executor	Benefician	v of Trust	5			
	Select one:	Other (Explain)						,	6			
	00.000 0.10.	outer (Explain)			·				7			
	NATURE OF APPEAL - LOCATION AND IDENTIFICATION OF REAL ESTATE					LIST COMPARABLE PROPERTY PIN(S) AND						
									PROPERTY CLA	SS BELOW		
	Appeal Type	Appeal Type Current Year Appeal Only Current Year & C of E Only Taxable Exempt										_
											_	
	Location of	Street / tuaress									_	
2	Subject Property	Subject Property: City Township									_	
_		IF SUBMITTING DATA FOR THIS APPEAL, SUBMIT IT WITH THIS APPEAL FORM.									_	
											_	
	How is the Subjection Property used?											
	that apply.	Crieck all	Zoning	Farmland	Wetland	Retenti	on	2-41	The assessment on the prop	•	ed is	
			Demolition	Common Area	Unbuildable	Contan	nination	Open Space	inaccurate based on the follo	owing facts:		
If pur	chased on or after Ja	anuary 1, 202	0, indicate year purch	ased and	Year							ļ
purch	ase price. If purchas	sed prior to Ja	nuary 1, 2020 insert " <sub>l</sub>	prior".	Purchase Pri							
	=		this appeal, has personal	=								
			rided by law pursuant to s T IN DENIAL OF THIS A		nois Code of Civil Pi	rocedure. NOTE:	FAILURE TO	FILE				
				FFLAL.								
Signa	ture of Taxpayer or	Attorney / Rep	oresentative									
									FIELD CHECK REQUEST If yes, attach explanation		YES	NO
				A	ATTORNEY / F	REPRESEN	TATIVE C	ONLY				
	ATTORNEY/REPRESENT	ATIVE CERTIFICA	ATION: I									_

		ATTO	DRNEY / REPRESENT	ATIVE ONLY		
ATTORNEY/REPRESENTATIVE CERTII	FICATION: I					
	ATTORI	NEY / REPRESENTATIVE	NAME (PRINT OR TYPE)	FIRM / COMPANY NAME		
				certify that I have of	btained from	
FIRM / COMPANY ADDRESS	CITY	ZIP	PHONE			TAXPAYER NAME
		(1) explicit authorizati	ion to file this 2023 assessment appe	al and/or Certificate of Error and	(2) the Taxpayers assurance	e that I am the only Attorney
TAXPAYER TITI	LE OR POSITION					
/Representative so authorized.						
Attorn	ney / Representative Fax Number	Attorney / R	Representative Signature and Code Nu	imber	e-mail Address	
NOTICE TO FILERS: YOU WILL	BE NOTIFIED BY MAIL OF THE	E APPEAL NUMBER. Y	OU CAN FIND YOUR APPEAL	NUMBER AND CHECK APPEAL	L STATUS ONLINE @ www	.cookcountyassessor.com
THIS FORM MUST BE PF	RESENTED IN DUPLICATE	. FILE 1ST COPY V	VITH COOK COUNTY ASS	ESSOR'S OFFICE - RETAIN	N TIME STAMPED 2ND	COPY FOR YOUR RECORDS.