PTAX-761 Request for Reduction Due to Destruction

Read this information first

You must complete Form PTAX-761 to request a reduction of assessment if a building, structure, or other improvement assessed for property tax purposes was damaged or destroyed and rendered uninhabitable and unfit for occupancy or customary use. The destruction must be by natural disaster or accidental means and not by the willful misconduct of the owner. You must file Form PTAX-761 within 90 days after the destruction or 90 days after the township or multi-township assessor mails you the application. Failure to do so shall result in no reduction of assessment to the property.

| St | ep 1: Provide the following information | | |
|-------------|--|-------|--|
| 1 | Property owner's name | | end notice to (if different than Line 1) |
| | Property owner's street address | 2 | Name |
| | Property owner's street address | | Street address |
| | City State ZIP | | Sileet address |
| | Telephone: (| | City State ZIP |
| | Email address: | | Telephone: () |
| | Property owner on January 1 of the assessment year if different than Line 1: | | Email address: |
| St | ep 2: Identify the property | | |
| 3 | Provide the street address of the property if different than the address you identified in Step 1, Line 1. | 4 | Write the property (parcel) number (PIN) listed on your property tax bill or obtain it from the Chief County Assessment Officer. |
| | Street address | | a PIN: |
| | | | b If unable to obtain your PIN, provide a legal description. |
| | City State ZIP | | |
| | | | |
| 5 6 7 | Write the date the improvement became uninhabitable or unfit f Was the improvement damaged by natural disaster or accidente What caused the destruction (you may attach additional docum | al me | eans?yesno |
| St | tep 4: Sign below | | |
| ۱s | tate to the best of my knowledge, the information contained in th iced, I will file a request for reassessment due to construction of | | |
| Pro | perty owner's or authorized representative's signature | | Month Day Year |
| St | ep 5: Mail your completed Form PTAX-761 | | |
| lf y | ou have any questions, please call () | | · |
| Ma | ail your completed Form PTAX-761 to: | | |
| | Mailing address | | |
| | 3 | | IL |
| | City | | IL ZIP |