



DeKalb County Administration Building
110 E. Sycamore Street
Sycamore, IL 60178
Phone (815) 895-7120 / Fax: (815) 895-1684

INSTRUCTIONS for LEASEHOLD – HOMESTEAD LIMITED EXEMPTION APPLICATION

35 ILCS 200/15-175 specifies that homestead property includes residential property that is occupied by its owner or owners as his or their principal dwelling place, or that is a leasehold interest on which a single family residence is situated, which is occupied as a residence by a person who has an ownership interest therein, legal or equitable or as a lessee, and on which the person is liable for pay property taxes.

Instructions:

1. Complete the property information
 - a. Property Index Number
 - b. Property Address
2. Complete the tenant and owner information
 - a. Tenant name
 - b. Owner name
3. The tenant must answer questions 1-4
4. The tenant must provide proof of being the taxpayer of record for the property and the effective date. In order to do so, the following will be required:
 1. Confirmation that the owner requested a duplicate tax bill to be mailed to the current "tenant/lessee".
 2. Copy of the lease itself, as referenced in item 6 below.
5. Tenant and Owner must sign (notarized signatures)
6. **Attach a copy of the lease covering Jan 1 thru Dec 31 for year applying.**

The lease MUST expressly state that the lessee is liable for the payment of property taxes.

The lease MUST also include the following language:

"Lessee shall be liable for the payment of real estate taxes with respect to the residence in accordance with the terms and conditions of 35 ILCS 200/15-175. The permanent real estate index number for the premises is _____, and according to the most recent property tax bill, the current amount of real estate taxes associated with the premises is _____ per year. The parties agree that the monthly rent set forth above shall be increased or decreased pro rata (effective January 1 of each calendar year) to reflect any increase or decrease in real estate taxes. Lessee shall be deemed to be satisfying Lessee's liability for the above-mentioned real estate taxes with the monthly rent payments as set forth above (or increased or decreased as set forth herein)."

7. **The application, Request for Duplicate Tax Bill and lease MUST be submitted annually to:**
Chief County Assessment Office
110 E. Sycamore St
Sycamore, IL 60178
8. Owner must notify the Chief County Assessment Office **within 30 days** when a tenant has vacated his/her property.

Please call the Chief County Assessment Office at 815-895-7120 with any questions you may have.

Robin L. Brunshon, CIAO-I
Chief County Assessment Officer



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Chief County Assessment Officer

LEASEHOLD - HOMESTEAD LIMITED EXEMPTION APPLICATION

In order to have this property considered for the Homestead Exemption for the 20__ assessment year, the following questions must be answered completely by the tenant and any supporting documentation as indicated must be supplied. Notarized signatures of the owner and tenant are required.

This form must be filed annually with the Chief County Assessment Office and MUST include a copy of signed lease(s) covering Jan 1 thru Dec 31 of year applying. Owner must complete a Request for Duplicate Tax Bill to be mailed to current tenant/lessee.

Permanent Index Number: ___ - ___ - ___ - ___

Property Address: _____

Tenant: _____ Telephone: _____ Email: _____

Owner: _____ Telephone: _____ Email: _____

TO BE COMPLETED BY LESSEE:

- 1. Did you have ownership interest or a leasehold interest in this property as of January 1st of the assessment year?
2. Did you occupy this property as your principal dwelling place as of January 1st of this year?
3. Does your lease specifically state that you are liable for the payment of real estate taxes?
4. ** Are you, as the tenant/lessee, the taxpayer of record on this parcel?

** See Step 6 on the following page with instructions for specific wording required within lease.

I state that, to the best of my knowledge, the information contained in this application is true, correct and complete and that I am subject to penalties for perjury for falsification herein.

Signature of Tenant/Lessee Print Name Date

Subscribed and sworn to me this ___ day of ___, 20__.

Notary Public

Signature of Owner Print Name Date

Subscribed and sworn to me this ___ day of ___, 20__.

Notary Public



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Chief County Assessment Officer

Request for Duplicate Tax Bill

PLEASE PRINT

Date: _____

Permanent Index Number: _____ - _____ - _____ - _____

Tax bill is currently being mailed to:

Owner's Name(s): _____

Property Address: _____

Mailing Address for tax bill: _____

I have a legal interest in the above Permanent Index Number and would like a duplicate tax bill mailed to:

Additional Name(s): _____

Additional Address: _____

Telephone: _____ Email: _____

I state that, to the best of my knowledge, the information contained in this application is true, correct and complete and that I am subject to penalties for perjury for falsification herein.

Signature of Owner

Print Name

Date

Signature of Owner

Print Name

Date

Telephone

Email