PTAX-329 Certificate of Status—Senior Citizens Homestead Exemption

Who should file this form?

You should file this form each year if you received a senior citizens homestead exemption in the prior year and your chief county assessment officer (CCAO) requires annual verification of your eligibility status. Failure to file this form may result in the termination of the exemption.

When and where must I file?

You must file this form with the CCAO at the address shown below by **May 31** of each year. Contact your CCAO for information on how you designate another person to receive a duplicate of a property tax delinquency notice for your property.

Note: You may be required to provide additional documentation.

Step 1: Complete the following information

Please type or print

1 _____
Property owner's name

_____
Street address of homestead property

_____ IL _____
City State ZIP

(_____)_____
Daytime phone

2 Write the assessment year for which you are filing this form. ____ ____ ____ ____

3 Write the property index number (PIN) of the property for which you are filing this form. Your PIN is listed on your property tax bill or you may obtain it from the CCAO. If you are unable to obtain your PIN, attach a copy of the legal description.

a PIN ___ ___-___ ___-___ ___ ___-___ ___ ___-___ ___ ___ ___

Step 2: Complete the eligibility status certification information

4 Did you receive a senior citizens homestead exemption on this property last year? ☐ Yes ☐ No

5 On January 1 were you the owner of record **or** did you have a legal or equitable interest in this property **or** did you have a life care contract with a facility under the Life Care Facilities Act? ☐ Yes ☐ No

6 On January 1 did you occupy this property as your principal residence? ☐ Yes ☐ No

7 On January 1 were you a resident of a facility licensed under the Assisted Living and Shared Housing Act, Nursing Home Care Act, or MR/DD (mentally retarded/developmentally disabled) Community Care Act? ☐ Yes ☐ No

If **Yes,**

a write the name and address of the facility.

_____

_____

b was this property occupied only by your spouse, who is 65 years of age or older? ☐ Yes ☐ No

c did this property remain unoccupied? ☐ Yes ☐ No

8 On January 1 were you liable for the payment of real estate taxes on this property? ☐ Yes ☐ No

9 Did you receive a senior citizens homestead exemption on any other property in Illinois last year? ☐ Yes ☐ No

If **Yes**, write the county location and the PIN. If you are unable to obtain your PIN, attach a copy of the legal description.

a _____ County

b PIN ___ ___-___ ___-___ ___ ___-___ ___ ___-___ ___ ___ ___

Note: Your exemption can continue if you now reside in a facility licensed under the acts listed in Line 6a if your property is occupied only by your spouse, who is 65 years of age or older, **or** your property remains unoccupied during the assessment year.

Step 3: Sign below

Under penalties of perjury, I state that to the best of my knowledge, the information on this form is true, correct, and complete.

_____ _____/_____/_____
Property owner's or authorized representative's signature Month Day Year

Subscribed and sworn to before me this ____ day of_____, ____ ____ ____ ____.

_____ _____/_____/_____
Notary public Month Day Year

If you have any questions, please call:

(_____)_____

Mail your completed Form PTAX-329 to:

_____ County Chief County Assessment Officer

_____
Mailing address

_____ IL _____
City ZIP

Official use. Do not write in this space.

Date received ___ ___/___ ___/___ ___ ___ ___

☐ Approved ☐ Denied

Board of Review action date ___ ___/___ ___/___ ___ ___ ___

Reason for denial _____

_____