Cook County Assessor's Office
118 N. Clark Street - 3rd Floor
Chicago, Illinois 60602
Office Hours: 8:30 A.M.- 5:00 P.M.

Joseph Berrios
Cook County Assessor
2012 Real Estate Assessed Valuation Appeal

COOK COUNTY ASSESSOR APPEAL NUMBER	CONDO - COOP
	C

RECEIVED AND CHECKED BY:

PLEASE COMPLETE ALL PARTS OF THE APPEAL FORM. TYPE OR PRINT ALL INFORMATION. COMPLY WITH ASSESSORS OFFICE RULES AND REGULATIONS IN FILLING OUT AND FILING THIS FORM. IF AIR RIGHTS PROPERTY, SUBMIT PLAT OF SURVEY.

1 IDENTIFICATION AND STATUS OF OWNER / TAXPAYER

Name of Taxpayer / Owner

Address Email

City State Zip Code Phone

Select one: ☐ Owner ☐ Former Owner Liable for Tax ☐ Tenant Liable for Tax ☐ Executor ☐ Beneficiary of Trust ☐ Other (Explain)

2 NATURE OF APPEAL - LOCATION AND IDENTIFICATION OF REAL ESTATE

Appeal Type ☐ Current Year Appeal Only ☐ Current Year & C of E ☐ C of E Only ☐ Taxable ☐ Exempt

Location of Subject Property: Street Address

City Township

How is the Subject Property used? ☐ Condominium ☐ Cooperative ☐ Other (Explain)

Is this an appeal of 100% of the entire property? ☐ YES ☐ NO If not, what % 0%

☐ Data to be submitted
☐ Data submitted with appeal

If purchased on or after January 1, 2009, indicate year purchased and purchase price. If purchased prior to January 1, 2009 insert "prior".

Year Purchase Price

The undersigned states that he/she has read this appeal, has personal knowledge of the contents thereof, and the same is true in substance and in fact and further so certifies under the penalties as provided by law pursuant to section 1-109 of the Illinois Code of Civil Procedure. NOTE: FAILURE TO FILE OWNER / LESSEE AFFIDAVIT MAY RESULT IN DENIAL OF THIS APPEAL.

Signature of Taxpayer or Attorney / Representative

List in ascending order all Permanent Index Numbers associated with the subject property.

	SUBJECT PROPERTY PERMANENT INDEX NUMBER(S)	CERTIFICATE OF ERROR YEAR(S) 2011	2010	2009
1		☐	☐	☐
2		☐	☐	☐
3		☐	☐	☐
4		☐	☐	☐
5		☐	☐	☐
6		☐	☐	☐
7		☐	☐	☐
8		☐	☐	☐
9		☐	☐	☐
10		☐	☐	☐
11		☐	☐	☐
12		☐	☐	☐
13		☐	☐	☐
14		☐	☐	☐
15		☐	☐	☐
16		☐	☐	☐
17		☐	☐	☐
18		☐	☐	☐
19		☐	☐	☐
20		☐	☐	☐
21		☐	☐	☐
22		☐	☐	☐
23		☐	☐	☐
24		☐	☐	☐
25		☐	☐	☐

3 ATTORNEY / REPRESENTATIVE ONLY

ATTORNEY/REPRESENTATIVE CERTIFICATION: I

ATTORNEY / REPRESENTATIVE NAME (PRINT OR TYPE) FIRM / COMPANY NAME

certify that I have obtained from

FIRM / COMPANY ADDRESS CITY ZIP PHONE TAXPAYER NAME

(1) explicit authorization to file this 2012 assessment appeal and/or Certificate of Error and (2) the Taxpayers assurance that I am the only attorney

TAXPAYER TITLE OR POSITION

/Representative so authorized.

Attorney / Representative Fax Number Attorney / Representative Signature and Code Number e-mail Address

NOTICE TO FILERS: YOU WILL BE NOTIFIED BY MAIL OF THE APPEAL NUMBER. YOU CAN FIND YOUR APPEAL NUMBER AND CHECK APPEAL STATUS ONLINE @ www.cookcountyassessor.com

THIS FORM MUST BE FILED IN DUPLICATE. FILE BOTH COPIES WITH COOK COUNTY ASSESSOR'S OFFICE - RETAIN TIME STAMPED COPY FOR YOUR RECORDS