



Model Home Application

Complete the following information

1. _____
 Property Owner's Name

 Street Address of Model Home Property

 City IL Zip

 Daytime Phone Number

 e-mail

Send Notices To:

2. _____
 Property Owner's Name

 Street Address of Mailing Address

 City IL Zip

 Daytime Phone Number

 e-mail

3. Write the assessment year for which you are requesting this model home assessment.

4. Write the date the property began to be used for model home purposes.

5. This model home is a _____ Single-family residence
 _____ Townhome
 _____ Condominium

6. Have you applied for other model home assessments in this County? _____yes
 _____no

If you checked yes, provide the PIN(s).

PIN _____

PIN _____

(attach separate sheet if needed).

7. Write the property index number (PIN) of the property for which you are requesting this model home assessment. 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, write the legal description on line b.

a. PIN _____

b. Write the legal description only if you are unable to obtain your PIN. (attach a separate sheet if needed)

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 representatives signature Date

Subscribed and sworn to before me on this _____day
 of _____, _____.

 Notary Public Date

For CCAO Use Only

Comments

Date Received