POST OFFICE WILL NOT DELIVER WITHOUT POSTAGE

IN REFERENCE TO THE PARCEL NUMBER ABOVE

1) Do you own this property? YES ☐ NO ☐

2) Is this property your primary residence? YES ☐ NO ☐

3) Date moved in _____

4) Street address of property _____

5) Mailing Address (P.O. Box) _____

_____

Please Mail This Portion After Completion

RETURN TO

STEPHANIE R KENNEDY
SUPERVISOR OF ASSESSMENTS
111 E WASHINGTON ST
MORRIS IL 60450

DETACH HERE

FOR THE YEAR _____

STEPHANIE R KENNEDY
SUPERVISOR OF ASSESSMENTS
111 E WASHINGTON ST
MORRIS IL 60450

PHONE: **(815) 941-3269**

**OWNER OCCUPIED EXEMPTION**

**MAIL TO**

**IMPORTANT NOTICE ENCLOSED PLEASE ANSWER ALL QUESTIONS AND RETURN PROMPTLY**

IN ACCORDANCE WITH 35 ILCS 200/15-175, WE SUBMIT THAT THIS PROPERTY IS OCCUPIED BY ITS OWNER OR OWNERS AS HIS OR THEIR PRINCIPAL DWELLING PLACE, OR THAT THERE 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 THE PAYMENT OF PROPERTY TAXES.

SIGNATURE X _____

STREET _____

CITY _____ ZIP _____