



# IROQUOIS COUNTY ASSESSMENT OFFICE

1001 East Grant Street, Watseka, Illinois 60970  
Phone (815) 432-6978

## Application for General Homestead Exemption

### SECTION 1: INSTRUCTIONS

#### A. Eligibility: To be eligible for the general homestead exemption:

- The property must be occupied as the primary residence by the eligible taxpayer.
- The eligible taxpayer must be liable for paying the real estate taxes on the property.
- **The taxpayer must provide a valid state driver's license or ID card with the primary residence address listed.**
- The eligible taxpayer must be an owner of record of the property or have a legal or equitable interest in the property as evidenced by a written instrument. In the case of a life estate, the life estate must have been established by a document recorded by the Iroquois County Recorder
- If a homestead exemption has been granted under this Section and the person awarded the exemption subsequently becomes a resident of a facility licensed under the Illinois Nursing Home Care Act or Illinois MR/DD Community Care Act, then the exemption shall continue so long as the residence continues to be occupied by the qualifying person's spouse, or if the residence remains unoccupied but is still owned by the person qualified for the homestead exemption

#### B. Application:

- After initial approval, the exemptions will be renewed automatically. If the property is no longer eligible for the exemption, it is the responsibility of the taxpayer to remove the exemption to avoid possible interest and penalties.
- When complete, please email the form to a Deputy Clerk:  
**blavoie@iroquoiscountyil.gov | eharroun@iroquoiscountyil.gov | bsimmons@iroquoiscountyil.gov**
- OR mail your completed form to:  
**Iroquois County Assessment Office  
1001 East Grant Street  
Watsseka, IL 60970**

#### C. Exemption Amount:

- Under 35 ILCS 200/15-175, qualified taxpayers are permitted an exemption that will remove up to \$6,000 from the equalized assessed value before taxes are calculated.

### SECTION 2: PROPERTY IDENTIFICATION (please print)

Owner Name(s): \_\_\_\_\_ Parcel No. \_\_\_\_\_

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

I have owned and occupied this property since: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Please list all additional residential properties owned (if you need more space, please use the back of this paper):

Street Address	City	State	Zip	Parcel Number

### SECTION 3: Oath I attest that: (applicants must check all applicable boxes)

- The above address was occupied by person(s) with legal or equitable interest as of January 1 of the current assessment year;
- The above address has been my primary residence since the date noted in Section 2;
- I am the owner of record or have a legal or equitable interest in the property as evidenced by written instrument; and
- I am liable for paying the taxes on this property, since the date stated above.

### SECTION 4: SIGNATURES

Signature of Owner/Taxpayer \_\_\_\_\_

Date \_\_\_\_\_

