

PIN:	
Location of Property ADDRESS:	

2024 RENTAL/OWNER OCCUPANCY EXEMPTION APPLICATION PROPERTY TAX AGREEMENT (Addendum to Rental Agreement)

This agreement is attached to, and forms a part of the Rental Agreement dated:	to
between Management and	Tenant(s).
In order for this property to qualify for the Rental/Owner Occupancy E	Exemption the Tenant must occupy
this SINGLE family residence as of January 1, 2024 and be liable for the residence in accordance with the terms and conditions of 35	ne payment of real estate taxes with 5 ILCS 200/15-175.
The permanent real estate index number (PIN) for the premises is most recent property tax bill, the current amount of real estate to per year. The parties agree that the monthl increased or decreased pro rata (effective January 1 of each calendar year) real estate taxes. Lessee shall be deemed to be satisfying Lessee's liability for with the monthly rent payments as set forth in the Lease (or increased or decreased	y rent set forth in the Lease shall be to reflect any increase or decrease in the above mentioned real estate taxes
Upon request of Tenant, Management agrees to provide a true and correct c Management for the leased premises for verification purposes.	
Management shall be responsible for transferring the real estate tax payment amount of said real estate taxes. Management shall be responsible for any penalties or intereal estate taxes in a timely manner. Tenant agrees that Management may, but is no account for the deposit of Tenant's monthly real estate tax amount. Tenant acknowled due and payable to Tenant on the monthly real estate amount held by the Management	erest should Management fail to pay said of required, to establish a separate escrow ledges and agrees that no interest shall be
Failure of Tenant to cooperate with Management in the payment of monthly real e forth in this Agreement may, at Management's sole election, be deemed a breach of the solution	
Upon request from the Supervisor of Assessments, Tenant agrees to promptly or certificate reasonably necessary to establish or verify Tenant's occupancy on Jan	
I, (print) tenant of said property, swear an provided above is true and correct. I occupied said property as of January 1, 20	nd affirm all information as 124.
Phone Number	
Tenant (Signature)	
I, (print) owner of said property, swear and a	affirm all information as provided
above is true and correct. The Tenant listed above occupied said property as of	
Owner Signature Phone Number	
Date: Email Address	
A copy of the Rental/Lease Agreement for this property must be provided with	
this application showing occupancy by the Tenant(s) listed above as of January 1, 2024 in order for the exemption to be granted.	For Office Use Only Received
Return this application along with a <u>copy of the lease</u> before <u>July 1st, 2024</u> to: Supervisor of Assessments – Winnebago County Administration Building 404 Elm St. – Room 301 Rockford, IL 61101 (815) 319-4460	Scanned by: