

Board of Review – Notes on Appeal

THIS FORM MUST BE COMPLETED AND FILED with the Property Tax Appeal Board within 90 days of the postmark date of notification to the board of review of the appeal. If the board of review is unable to submit the form and evidence within the 90-day period, a request for an extension of time must be submitted. Without a written request for a filing extension, no other evidence will be accepted after 90 days. File this form, evidence and rebuttal. For assessment years **before 2016** submit in **duplicate**; except where a change in assessed valuation of more than \$100,000 is sought, file in **triplicate**. For assessment year **2016 and after**, file a **single copy**; except if the total submission is 500 pages or more, file in triplicate. Hearing requested? yes no

_____ County PTAB Docket No. _____

Appellant _____ Parcel Address _____

Property ID No. (P.I.N.) _____ Township _____

What is the first year of the General Assessment Cycle for the subject property? _____

In Cook County – Property classification pursuant to Cook County classification ordinance _____

Will the board of review stipulate in this appeal? yes no

If yes, state revised opinion of assessed value: Land _____ Impr. _____ Total _____

Indicate proof of this contention below or attach appropriate evidence.

Appellant did did not file a complaint before the board of review.

Appellant did did not appear before the board of review upon proper notice.

Final notice of the board of review decision was postmarked on _____

In Cook County – Date board of review transmitted to the county assessor its final action on township in which property is located _____

Assessment prior to board of review action. Land _____ Impr. _____ Total _____

Assessment after board of review action. Land _____ Impr. _____ Total _____

Did the township assessor, Chief County Assessment Officer and/or board of review apply a township equalization factor?
 yes no

If yes, list the factor and equalized assessment: Factor _____ Land _____ Impr. _____ Total _____

If Farm, show the breakdown. Farmland _____ Homesite _____ House _____ Outbuildings _____

Date: _____ Signed: _____

Signature of Board of Review Member, Commissioner, or designee

Please return this form and evidence requested to:

STATE OF ILLINOIS
PROPERTY TAX APPEAL BOARD
ROOM 402 STRATTON OFFICE BUILDING
401 SOUTH SPRING STREET
SPRINGFIELD, IL 62706-4001

Printed by Authority of the State of Illinois. This form is promulgated pursuant to 35 ILCS 200 Article 7 and 35 ILCS 200/16-160 through 16-195, and 1910.40 of the rules of the Property Tax Appeal Board. Failure to complete and timely file this form shall result in the default of the Board of Review as provided in 1910.69 of the rules of the Property Tax Appeal Board. IL-492-3399

Comparable Sales/Assessment Equity Grid Analysis

As an alternative, an appraisal establishing the fair market value of the subject property under appeal as of the assessment date may be submitted. **(Note: If a hearing is held in the case, the PTAB will be better able to judge the weight and credibility of the appraisal if your appraiser testifies in person.)**

Comparable Sales: Provide at least three recent sales of property comparable to the subject property. Complete the entire grid analysis (except assessment data). Include dates of sale and prices paid. Submit a property record card and/or listing sheet of each sale. (Note: Comparable sales should be similar to the subject property in location, size, design, age, and amenities.)

Assessment Equity: Provide at least three properties similar to the subject property and include the assessment of each property for the assessment year on appeal. Complete the entire grid analysis (except sale data). Submit a property record card for each property. (Note: Assessment comparables should be similar to the subject property in location, size, design, age, and amenities.)

| | Subject Property | Comp #1 | Comp #2 | Comp #3 | Comp #4 |
|---|------------------|---------|---------|---------|---------|
| Property Index Number (P.I.N.) | | | | | |
| Address | | | | | |
| Proximity to subject | | | | | |
| Location (subdivision) | | | | | |
| Lot size | | | | | |
| Design/Number of stories | | | | | |
| Exterior construction | | | | | |
| Age of property | | | | | |
| Condition | | | | | |
| Number of bathrooms | | | | | |
| Number of bedrooms | | | | | |
| Total room count | | | | | |
| Size – Square Feet | | | | | |
| Basement area (square feet) | | | | | |
| Finished basement area (sq.ft.) | | | | | |
| Air conditioning | | | | | |
| Heating | | | | | |
| Fireplace | | | | | |
| Garage or car port (square feet) | | | | | |
| Other improvements | | | | | |
| Date of sale | | | | | |
| Sale price | | | | | |
| Sale price per square foot | | | | | |
| Land assessment | | | | | |
| Improvement assessment | | | | | |
| Total assessment | | | | | |
| Assessment per sq. ft. = (Impr. assessment / Impr. sq. ft.) | | | | | |