



**James M. Houlihan**  
Cook County Assessor

**Cook County Assessor's Office**  
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## Condominium Appeal

Appeal Year \_\_\_\_\_

Town \_\_\_\_\_

Appeal Number \_\_\_\_\_

Subject Property Permanent Index Number(s)

\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
 \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
 \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
 \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
 \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

*(Attach separate sheet for additional PINs)*

Owner/Taxpayer \_\_\_\_\_

Owner's Street Address \_\_\_\_\_

( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
Daytime Phone Number

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Property Street Address \_\_\_\_\_

Township \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Major Class \_\_\_\_\_

The assessment on the property described above is inaccurate based on the following facts:

\_\_\_\_ - \_\_\_\_

Field Check Request

Yes

No

Certificate of Error Request

Yes

**Through my signature below, I affirm that I am the owner/lessee or appointed representative and that all information is true to the best of my knowledge.**

Signature of Owner/Lessee or Representative \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**As appointed representative for the owner/lessee of the property described above, I have also submitted the Owner / Lessee Verification Affidavit.**

Atty / Rep Code \_\_\_\_\_

### FOR OFFICE USE ONLY

Received by (Assessor Staff) \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Reason Code \_\_\_\_\_

Assessed Value \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_