

LaSalle County
SENIOR CITIZEN'S HOMESTEAD RENEWAL
YEAR 2025

(Name)

(Address)

(City, State & Zip)

PIN # _____

Date of Birth: _____/_____/_____

Spouses Date of Birth: _____/_____/_____

Phone: (_____) _____

- | | <u>Yes</u> | <u>No</u> |
|---|------------|-----------|
| 1. Did you own this property as of January 1 st of this year (or did you have a legal or equitable interest in this property)? | _____ | _____ |
| 2a. Was this your primary residence as of January 1 st of this year? | _____ | _____ |
| OR | | |
| b. Were you a resident of a nursing home and your property remained vacant or your spouse who is 65 years or older, reside at this residence? | _____ | _____ |
| 3. Are you receiving a Homestead Exemption based upon your age on any other property? | _____ | _____ |

I hereby certify this to be a true and correct reporting of the facts concerning this property.

Signature: _____ Date: _____
(If you are signing this document for someone other than yourself please provide proper documentation such as P.O.A.)

IMPORTANT: This should be completed and turned in to the following address on or before May 1, 2025.
Failure to file shall constitute cause to terminate the exemption.

PLEASE RETURN THIS FORM TO THE FOLLOWING ADDRESS

LaSalle County, CCAO
707 E. Etna Rd.
Ottawa, IL 61350