

STATE OF ILLINOIS }
 }SS.
COUNTY OF WILL }



Will County
Supervisor of Assessments Office
302 N. Chicago Street
Joliet, IL 60432
Office: (815) 740-4648
Fax: (815) 740-4696

AFFIDAVIT

Request To Remove Property Exemption(s)

Assessment Year _____

Parcel Number(s) _____

I _____, voluntarily request that any
property exemption(s) located at _____

be removed due to the following reason(s):

- A. Said property is no longer occupied as a primary residence.
- B. Property owner of said property is deceased.
- C. Per the request of property owner to remove on said residence.

Signature of Tax Payer

Date

Final determination by Supervisor of Assessments Office

Signature of Administrative Clerk

Date