

SUGAR GROVE TOWNSHIP ASSESSOR

CURT JOHN KARAS, CIAO CPA MBA

CERTIFIED ILLINOIS ASSESSING OFFICER

2021

REQUEST FOR PROPERTY ASSESSMENT REVIEW

(THIS IS NOT THE APPEAL FORM FOR KANE COUNTY BOARD OF REVIEW ASSESSMENT COMPLAINTS)

Parcel ID Number (PIN#) 14 - - -

Reason for Request _____

Property Address _____ City _____

Owner(s) Name _____ Phone _____

If different than property address

Mailing Address _____ Email _____

City/State/Zip _____

Property is: Owner Occupied Rented/Leased (monthly rent/lease) \$ _____

Tax Payer's Estimate of Market Value \$ _____

(for property tax purposes only, not for real estate purposes)

Market value is established using sales on a 3-yr weighted average of similar properties as of

January 1, 2018 through December 31, 2020

An appraisal report can be considered if dated as of January 1st of the assessment year and contains comparable sales preceding the assessment date

PROPERTIES COMPARABLE TO SUBJECT BY MODEL/NEIGHBORHOOD

Property Address/Parcel ID# _____ STY Description (same as subject)

1) _____

2) _____

3) _____

4) _____

Signature _____

Date _____

Additional Comments

Request for Additional Information

.....
For office use only
.....

Date of Inspection _____ Assessing Official _____

Assessor Comparables/Findings/Recommendations
