

# PTAX-762-C Certificate of Ineligibility for Model Home Assessment

## Who must complete this form?

You must complete this form and specify the reason for ineligibility when any portion of the model home property no longer qualifies for the alternate assessment. (See Question 4, Step 1)

## When and where must I file?

You must file this form with the chief county assessment officer (CCAO) at the address shown below within 60 days of the date the property becomes ineligible.

**Note:** You may be required to provide additional documentation.

## Step 1: Complete the following information

1 \_\_\_\_\_  
Property owner's name

\_\_\_\_\_  
Street address of model home property

\_\_\_\_\_  
City IL \_\_\_\_\_  
ZIP

(\_\_\_\_\_) \_\_\_\_\_  
Daytime phone

Send notice to (if different than above)

2 \_\_\_\_\_  
Name

\_\_\_\_\_  
Mailing address

\_\_\_\_\_  
City State ZIP

(\_\_\_\_\_) \_\_\_\_\_  
Daytime phone

3 Write the date the property became ineligible for the model home assessment. \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

4 Check the reason for ineligibility

occupied as a dwelling

sold for use other than as a model home

leased for use other than as a model home

more than 3 model homes located at the same time within a 3-mile radius

other (specify) \_\_\_\_\_

5 Write the property index number (PIN) of the property for which you received the model home assessment. Your PIN is listed on your property tax bill or you may obtain it from the CCAO. If you are unable to obtain your PIN, write the legal description on Line b.

a PIN \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

b Write the legal description only if you are unable to obtain your PIN. (attach separate sheet if needed)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Step 2: Sign below

Under penalties of perjury, I state that, to the best of my knowledge, the information on this form is true, correct, and complete.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Property owner's or authorized representative's signature Date

Subscribed and sworn to before me this \_\_\_\_\_ day  
of \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Notary public Date

If you have any questions, please call:

(217) 253-3031

Mail your completed Form PTAX-762-C to:

Douglas County Chief County Assessment Officer  
401 S. Center, Room 103  
Mailing address  
Tuscola IL 61953  
City ZIP

For use by the CCAO

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

Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_