

**COMBINED Renewal Application for Senior Homestead Exemption AND
2025 Application for Senior Citizen Assessment Freeze Exemption PTAX-340**

THE TOP PART OF THIS FORM IS FOR THE RENEWAL OF THE SENIOR HOMESTEAD EXEMPTION. PLEASE RETURN THIS ENTIRE FORM, EVEN IF YOUR INCOME IS ABOVE THE STATUTORY LIMIT OF \$65000.

A homestead exemption in the amount of \$5,000 maximum reduction from the valuation as equalized by the Department of Local Government Affairs, of the real property hereinafter described is requested on the grounds that the requirements of Section 19,23-1 of the Revenue Act of 1939, as amended, relative to the Homestead Exemption have been met.

RETURN BY: 5/1/2025

Date of Birth:

Phone #:

Property Owner's Name & Address:

Legal Description / Parcel Number:

The undersigned states that no other application for homestead exemption has been or will be filed by him (her) on any other real property in Illinois or any other state.

The undersigned also states that he (she) is liable for paying real estate taxes on the above described real property and is an owner of record of said real property or has a legal equitable interest in said real property (other than a leasehold interest).

The undersigned also states that the real property above described is occupied as a residence by the undersigned.

Senior Citizens Assessment Freeze Income Information

If your spouse maintains a separate residence, has he or she applied for this exemption? ___ Yes ___ No

You must include the **2024** income of you, your spouse, and all other individuals who live in the household. **GROSS INCOME**

- 1. Social Security and SSI benefits. Include Medicare deductions in this total. 1 _____
- 2. Railroad Retirement benefits. Include Medicare deductions in this total 2 _____
- 3. Civil Services benefits 3 _____
- 4. Annuities, federally taxable pensions and retirement plan distributions. 4 _____
- 5. Human Services and other governmental cash public assistance benefits 5 _____
- 6. Wages, salaries, and tips from work 6 _____
- 7. Interest and dividends received 7 _____
- 8. Net rental, farm, and business income or (loss). (See instructions for Line 8.) 8 _____
- 9. Net capital gain or (loss). (See instructions for Line 9.) 9 _____
- 10. Other income or (loss). (See instructions for Line 10.) 10 _____
- 11. Add Lines 1 through 10. 11 _____

12. Certain subtractions. You may subtract only the reported adjustments to income from **U.S. 1040, Schedule 1, Line 26.**

<u>Subtraction Item</u>	<u>Amount</u>	
12a _____	_____	
12b _____	_____	
Add the amounts on Lines 12a and 12b, and write the result.		12 _____

13. Subtract Line 12 from Line 11, and write the result. This is your total household income for 2024. If the amount is greater than \$65000, STOP. You do not qualify for this exemption. 13 _____

****Under penalties of perjury, I state that, to the best of my knowledge, the information contained in this affidavit is true, correct, and complete****

Date: _____ Signature: _____

Return this application to:

**Douglas County Supervisor of Assessments
401 S. Center, Room 103 Tuscola, IL 61953**

Questions, please call: (217) 253-3031