

Commercial/Industrial Assessment Complaint for 2025 Page 1 of 2

KANE COUNTY BOARD OF REVIEW

719 Batavia Avenue, Building C Geneva, Illinois 60134-3000 (630) 208-3818

https://Assessments.KaneCountyIL.gov

| STOP BOARD USE ONLY | |
|---------------------|---------------|
| Postmark Date | _Complaint No |
| Use Code | Tax Code |
| Hearing Date | Hearing Time |

- 1. The assessment complaint process is governed by the Board of Review's Rules and Procedures, which can be found at https://Assessments.KaneCountyIL.gov/Documents/Rules.pdf. All are advised to review them prior to filing a complaint.
- 2. This form must be filed no more than 30 days from the date of publication required under 35 ILCS 200/12-10.
- 3. All evidence must either accompany this complaint form, or be submitted electronically at https://Assessments.KaneCountyIL.gov no more than 14 calendar days after final filing deadline. The Board will not accept additional written documentation after the filing is made except as provided in the Rules and Procedures.
- 4. Publication dates and filing/evidence deadlines are available at https://Assessments.KaneCountyIL.gov/Pages/Deadline.aspx.
- 5. If the complaint has more than one page, do not use staples or other bindings; use paper clips or binder clips instead.
- 6. Corporate taxpayers and owners (including LLCs) must be represented by an attorney licensed to practice law in Illinois.

| Section 1: Property Identification (requi | Owner of Record. | | | | |
|---|---|---|--|--|--|
| Parcel No | | | | | |
| Property Address: | ———— Mailing City, State, ZIP | | | | |
| Property City, State, ZIP: | Telephone Number: | Telephone Number: | | | |
| Check all that apply: ☐ Owner Occupied ☐ ☐ | Tenant Occupied Vacant % Cers must be represented by an attorney lice y licensed to practice law in Illinois, please fi | Monthly Gross Rent: \$ | | | |
| Attorney Name: | IL ARDC Registration 1 | No.: | | | |
| Firm Name: | Address: | | | | |
| Telephone: | City, State, ZIP: | | | | |
| the hearing. I understand that failure to additional evidence (except through the | n the foregoing complaint are true and correct have attached a properly executed power of auction of \$100,000 or more of equalized assembly aint and given opportunity to intervene in the | et to the best of my knowledge; and attorney; and attorney; and I understand that local e proceedings; if this box is not checked, his taxable year. please notify me of the date and time of int. I understand that I cannot submit the filing deadline) after this filing. | | | |
| Taxpayer or attorney signature | Print Name | Date | | | |
| | | | | | |

| | | Contra | ici citti Intitusti titi 2155c55iiiciti Com | piuini joi 2023, 1 uge 2 oj 1 | | | |
|---|---|---|---|-------------------------------|--|--|--|
| ☐ 1. Overvaluation My prop | erty's Equalized As | int (required) Check all that apsessed Valuation (EAV) is greated or attach complete appraisal rep | er than 1/3 its Fair Cash Valu | | | | |
| 2. Equity My property's Equalized Assessed Valuation (EAV) is greater than the 2024 EAVs of other comparable properties in the neighborhood (must provide at least three EAV comparables in Section 5; see Rule E of <i>Rules and Procedures</i>). 3. Discrepancy in Physical Data My property's Equalized Assessed Valuation (EAV) was based on a property record card description that contains a discrepancy from the actual physical data for my property (must attach explanation of discrepancy and must state the valuation sought; see Rule F of <i>Rules and Procedures</i>). | | | | | | | |
| | | | | | | | |
| Section 4: Sale Comparal | bles/EAV Compai | ables | | | | | |
| EAV comparables from 2 Please use at least three comparables will Check all that apply: | 025 are required for omparables; if you v I have features most isal report has been/ | 24 are required for all assessment all assessment complaints based wish to submit more, please use a similar to the subject's features. will be submitted (see Rule D.7 in the submitted | on Equity. dditional pages. n Rules and Procedures for the | nore information) | | | |
| ∐Income | | /will be submitted (see Rule D.8. | | | | | |
| | Subject | Comparable 1 | Comparable 2 | Comparable 3 | | | |
| Parcel Number _ | | | | | | | |
| Address _ | | | | | | | |
| Property Type _ | | | | | | | |
| Exterior Material | | | | | | | |
| Land Area | | | | | | | |
| Number of Units _ | | | | | | | |
| Year Built _ | | | | | | | |
| Building Area (Sq. Ft.) | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| • | • • | sale data from 2022, 2023, and/ | | | | | |
| | | | | | | | |
| Sale Date _ | | | | | | | |
| 7. If complaint based on Equ | iity, provide assesse | d-valuation data from 2025. | | | | | |
| | | | | | | | |
| Buildings _ | | | | | | | |
| Farm Land _ | | | | | | | |
| Farm Buildings | | | | | | | |
| Total EAV _ | | | | | | | |
| Comments on Comparables (| use additional sheet | s if necessary). | | | | | |
| Section 5: Taxnaver Onini | on of Correct Acc | essment (required) | Land | | | | |
| Section 5: Taxpayer Opinion of Correct Assessment (required) All evidence attached and opinion provided at right | | Buildings | | | | | |
| | - | | Farm Land | | | | |
| ☐ Opinion unknown; complainant will submit evidence and requested valuation amount no later than 14 days after the final filing deadline for this property at https://Assessments.KaneCountyIL.gov . | | Farm Buildings | | | | | |
| | | Total Assessment | . 22 220/ | | | | |
| | | | Level of Assessment Fair Cash Value | ÷ 33.33% | | | |