



KANE COUNTY BOARD OF REVIEW

719 Rotundo Avenue, Building C



BOARD USE ONLY

Postmark Date _____ Complaint No. _____

The purpose of Section 1 is to identify the property that is the basis of the complaint and the contact information for those who are filing the complaint.

6. Corporate taxpayers and owners (including LLCs) must be represented by an attorney licensed to practice law in Illinois.
7. Instructions for this form are available at <https://Assessments.KaneCountyIL.gov/Pages/Assessment-Complaints.aspx>.
8. If the taxpayer requires an appearance before the Board but fails to appear, the complaint may be dismissed.
9. Questions about this form or the Board's Rules and Procedures may be directed to the Board office at (630) 208-3818.

Section 1: Property Identification (required)

Parcel No. - - - Owner of Record: _____
Mailing Address: _____
Property Address: _____ Mailing City, State, ZIP: _____
Property City, State, ZIP: _____ Telephone Number: _____

Check all that apply: ☐ Property occupied by owner ☐ Property occupied by tenant(s) for total monthly rent of \$ _____

Note: All corporate owners/taxpayers must be represented by an attorney licensed to practice law in Illinois.

If owner/taxpayer is represented by an attorney licensed to practice law in Illinois, please fill out the following information
(A power of attorney signed by an owner of record or taxpayer is required; otherwise, the complaint will be returned.)

Attorney Name: _____ IL ARDC Registration No.: _____
Firm Name: _____ Address: _____
Telephone: _____ City, State, ZIP: _____

Section 2: Oath (required) I swear or affirm that:

KANE COUNTY

719 Bata

Geneva,

(630) 208

[https://A](https://Assessments.KaneCountyIL.gov/Rules.pdf)

Instructions

1. The <https://Assessments.KaneCountyIL.gov/Rules.pdf>. All are advised to review them prior to filing a complaint.
2. This form must be filed from the date of publication required under 35 ILCS 200/12-10.
3. All evidence must either be submitted in written form, or be submitted electronically at <https://Assessments.KaneCountyIL.gov/Pages/Deadline.aspx>. The Board will not accept additional written documents more than 14 calendar days after final filing deadline. The Board will not accept additional written documents if filing is made except as provided in the Rules and Procedures.
4. Publication dates and filing 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 other entities (including LLCs) must be represented by an attorney licensed to practice law in Illinois.
7. Instructions for this form are available at <https://Assessments.KaneCountyIL.gov/Pages/Assessment-Complaints.aspx>.
8. If the taxpayer requires an appearance before the Board but fails to appear, the complaint may be dismissed.
9. Questions about this form or the Board's Rules and Procedures may be directed to the Board office at (630) 208-3818.

Section 1: Property Identification (required)

Parcel No. - - - Owner of Record: _____

Mailing Address: _____

Property Address: _____ Mailing City, State, ZIP: _____

Property City, State, ZIP: _____ Telephone Number: _____

Tip: If you have more than one Parcel Number for the same property, you can file one complaint form and identify the other Parcels on the [Multi-Parcel Addendum](#).

Section 2: Oath (required) I swear or affirm that:



KANE COUNTY BOARD OF REVIEW

719 Batavia Avenue, Building C

Geneva, Illinois 60134-3000

(630) 208-3818

<https://Assessments.KaneCountyIL.gov>



BOARD USE ONLY

Postm

Use C

Hearin

This is the name of the owner of record and the mailing address of the owner or taxpayer.

This is the address of the property that is the subject of this complaint.

1. The assessment complaint process is governed by <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 200/1-2.
3. All evidence must either accompany this complaint form, or be submitted electronically at <https://Assessments.KaneCountyIL.gov/Assessment-Complaints.aspx> by the final filing deadline. The Board will not accept late filings. Please review the Rules and Procedures for Assessment Complaints at <https://Assessments.KaneCountyIL.gov/Assessment-Complaints.aspx>. Please use paper clips to attach evidence; use paper clips or staples instead.
4. If the taxpayer requires an appearance by an attorney licensed to practice law in Illinois, please fill out the following information. <https://Assessments.KaneCountyIL.gov/Pages/Assessment-Complaints.aspx>
5. Questions about this form or the Board's procedures may be directed to the Board office at (630) 208-3818.

Section 1: Property Identification (required)

Parcel No. - - - Owner of Record: John Q. Public Trust

Mailing Address: P.O. Box 999

Property Address: 123 Main Street Mailing City, State, ZIP: Anytown, IL 69999

Property City, State, ZIP: Anytown, IL 69999 Telephone Number: 630-555-1234

Check all that apply: ☐ Property occupied by owner ☐ Property occupied by tenant(s) for total monthly rent of \$ _____

Note: All corporate owners/taxpayers must be represented by an attorney licensed to practice law in Illinois.

If owner/taxpayer is represented by an attorney licensed to practice law in Illinois, please fill out the following information
(A power of attorney signed by an owner of record or taxpayer is required; otherwise, the complaint will be returned.)

Attorney Name: _____ IL ARDC Registration No.: _____

Firm Name: _____ Address: _____

Telephone: _____ City, State, ZIP: _____

Section 2: Oath (required) I swear or affirm that:

**KANE COUNTY BOARD OF REVIEW**

719 Batavia Avenue, Building C

Geneva, Illinois 60134-3000

(630) 208-3818

<https://Assessments.KaneCountyIL.gov>**BOARD USE ONLY**

Postmark Date _____ Complaint No. _____

Use Code _____ Tax Code _____

Hearing Date _____ Hearing Time _____

Instructions

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.

Check here to indicate if the property is owner-occupied or tenant-occupied, and indicted total monthly rent if applicable.

2. This form must be filed no more than 30 days from the date of publication required under 25 ILCS 200/12-10.
3. The Board will not accept late filings.
4. For more information, visit <https://Assessments.KaneCountyIL.gov/Pages/Assessment-Complaints.aspx>.
5. Do not staple or clip instead.
6. This form is only valid for use in Illinois.
7. Instructions for filing a complaint are available at <https://Assessments.KaneCountyIL.gov/Pages/Assessment-Complaints.aspx>.
8. If the taxpayer requests a hearing before the Board but fails to appear, the complaint may be dismissed.
9. Questions about the Board's Rules and Procedures may be directed to the Board office at (630) 208-3818.

Section 1: Property Information (required)Parcel No. 01-456-789 Owner of Record: John Q. Public TrustMailing Address: P.O. Box 999Property Address: 12 Main Street Mailing City, State, ZIP: Anytown, IL 69999Property City, State, ZIP: Anytown, IL 69999 Telephone Number: 630-555-1234Check all that apply: ☒ Property occupied by owner ☐ Property occupied by tenant(s) for total monthly rent of \$ _____**Note: All corporate owners/taxpayers must be represented by an attorney licensed to practice law in Illinois.**

If owner/taxpayer is represented by an attorney licensed to practice law in Illinois, please fill out the following information
(A power of attorney signed by an owner of record or taxpayer is required; otherwise, the complaint will be returned.)

Attorney Name: _____ IL ARDC Registration No.: _____

Firm Name: _____ Address: _____

Telephone: _____ City, State, ZIP: _____

Section 2: Oath (required) I swear or affirm that:

**KANE COUNTY BOARD OF REVIEW**

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

<https://Assessments.KaneCountyIL.gov>

**BOARD USE ONLY**

Postmark Date _____ Complaint No. _____

Use Code _____ Tax Code _____

Hearing Date _____ Hearing Time _____

Tip: You are not required to have an attorney, but any filing made by an attorney must include a written Power of Attorney or the complaint cannot be accepted.

Instructions

4. Publication

5. If the complaint

6. Corporate taxpayer

7. Instructions for the

8. If the taxpayer requ

9. Questions about this

es are available at <https://Assessments.KaneCountyIL.gov/Pages/Deadline.aspx>.

do not use staples or other bindings; use paper clips or binder clips instead.

(LLCs) must be represented by an attorney licensed to practice law in Illinois.

<https://Assessments.KaneCountyIL.gov/Pages/Assessment-Complaints.aspx>.

the Board but fails to appear, the complaint may be dismissed.

ules and Procedures may be directed to the Board office at (630) 208-3818.

Section 1: Property Identification (Required)

Parcel No. 01-23 - 789 Owner of Record: John Q. Public Trust

Property Address: 123 Main Street Mailing Address: P.O. Box 999

Property City, State, ZIP: Anytown, IL 69999 Mailing City, State, ZIP: Anytown, IL 69999

Telephone Number: 630-555-1234

Check all that apply: ☒ Property occupied by owner ☐ Property occupied by tenant(s) for total monthly rent of \$ _____

Note: All corporate owners/taxpayers must be represented by an attorney licensed to practice law in Illinois.

If owner/taxpayer is represented by an attorney licensed to practice law in Illinois, please fill out the following information

(A power of attorney signed by an owner of record or taxpayer is required; otherwise, the complaint will be returned.)

Attorney Name: Rahliegh Cheatham, Esq. IL ARDC Registration No.: 1234567

Firm Name: Dewey, Cheatham & Howe Address: 995 Park Ave.

Telephone: 847-555-9876 City, State, ZIP: Anytown, IL 69999

Section 2: Oath (required) I swear or affirm that:

Questions?



Visit

Assessments.KaneCountyIL.gov

or call (630) 208-3818.