PTAX-761 Request for Reduction Due to Destruction

Read this information first

You must complete Form PTAX-761 to request a reduction of assessment if a building, structure, or other improvement assessed for property tax purposes was damaged or destroyed and rendered uninhabitable and unfit for occupancy or customary use. The destruction must be by natural disaster or accidental means and not by the willful misconduct of the owner. You must file Form PTAX-761 within 90 days after the destruction or 90 days after the township or multi-township assessor mails you the application. Failure to do so shall result in no reduction of assessment to the property.

	Step 1: Provide the following information						4)	
1	Property owner's name			end notice to (if different than Line 1)				
	Property owner's street address		2	Name				
				Street address				
	City State	ZIP		01100	, , , , , , , , , , , , , , , , , , , ,			× ×
	Telephone: ()			City State ZIP				
				Telephone: ()				
	Property owner on January 1 of the assessment year if different than Line 1:			Email address:				
St	tep 2: Identify the property							
3	Provide the street address of the property if different than the address you identified in Step 1, Line 1.			Write the property (parcel) number (PIN) listed on your property tax bill or obtain it from the Chief County Assessment Officer.				
	Street address			a F	PIN:			
				b li	f unable to ob	tain your PIN, pro	vide a legal	description.
	City State	ZIP						
6 7	Was the improvement damaged by nat What caused the destruction (you may		ntatio	on):				
_ St	ep 4: Sign below							
l st pla	ate to the best of my knowledge, the inf ced, I will file a request for reassessmen	ormation contained in this nt due to construction of in	requ nprov	est t eme	rue, correct, a ints, within 30	days after the co	ne improven empletion da	nent is re- te.
Prop	Property owner's or authorized representative's signature				Month Day	Year —		
St	ep 5: Mail your completed F	orm PTAX-761						+-
lf y	ou have any questions, please call (309)547_30)41					
Ма	il your completed Form PTAX-761 to:	Fulton County Asse	essn	nent	Office			
		PO BOX 283						
		Mailing address				04540		
		Lewistown			IL	61542		