

# PTAX-341 Application for Returning Veterans' Homestead Exemption

## Step 1: Complete the following information

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

\_\_\_\_\_  
Street address of homestead property

\_\_\_\_\_  
City **IL** State ZIP

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

Send notice to (if different than above)

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

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

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

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

**3** Write the assessment years for which you are filing this form.

Year you returned home \_\_\_\_\_ Year after you returned home \_\_\_\_\_

**4** Write the property index number (PIN) of the property for which you are requesting the returning veterans' homestead exemption. Your PIN is listed on your property tax bill or you may obtain it from your Chief County Assessment Officer (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 a separate sheet if needed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Step 2: Complete eligibility information

**5** Are you a veteran and an Illinois resident?  Yes  No

**6** Have you served as a member of the U.S. Armed Forces, Illinois National Guard, or U.S. Reserve Forces?  Yes  No

**7** Did you return from active duty in an armed conflict involving the armed forces of the United States?  Yes  No

If "Yes", write the date you returned home.

Month \_\_\_\_ / Day \_\_\_\_ / Year \_\_\_\_

**8** Check your type of residence.

- |   |                                      |
|---|--------------------------------------|
| <input type="checkbox"/> Single-family dwelling | <input type="checkbox"/> Duplex      |
| <input type="checkbox"/> Townhouse              | <input type="checkbox"/> Condominium |
| <input type="checkbox"/> Apartment              | <input type="checkbox"/> Other _____ |

**9** Is the residence operated as a cooperative?  Yes  No

**10** On January 1 of the year you returned home, were you the owner of record or did you have a legal or equitable interest in this property?  Yes  No

• If "No", write the date you acquired an interest in this property. \_\_\_\_\_  
Month \_\_\_\_ / Day \_\_\_\_ / Year \_\_\_\_

**11** On January 1 of the year you returned home, did you occupy this property as your principal residence?  Yes  No

• If "No", write the date you first occupied this property? \_\_\_\_\_  
Month \_\_\_\_ / Day \_\_\_\_ / Year \_\_\_\_

**12** On January 1 of the year you returned home, were you liable for the payment of real estate taxes on this property?  Yes  No

**Note:** You must provide documentation with this form. See the back of this form "Do I need to provide documentation?"

## Step 3: Attach proof of ownership

**13** Check the type of documentation you are **attaching** as proof that you are the owner of record or have a legal or equitable interest in the property.

- |  |   |
|--|---|
| <input type="checkbox"/> Deed            | <input type="checkbox"/> Contract for deed        |
| <input type="checkbox"/> Trust agreement | <input type="checkbox"/> Other written instrument |
| <input type="checkbox"/> Lease           | Specify: _____                                    |

**14** Write the date the written instrument was executed. \_\_\_\_\_  
Month \_\_\_\_ / Day \_\_\_\_ / Year \_\_\_\_

**15** Is the instrument recorded?  Yes  No

**16** If known, write the date recorded and the document number from the county records.

Date recorded \_\_\_\_\_  
Month \_\_\_\_ / Day \_\_\_\_ / Year \_\_\_\_

Recorded document number \_\_\_\_\_

## Step 4: Sign below

I state that to the best of my knowledge, the information on this application is true, correct, and complete.

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

\_\_\_\_\_  
Month \_\_\_\_ / Day \_\_\_\_ / Year \_\_\_\_

# Form PTAX-341 General Information

## What is the Returning Veterans' Homestead Exemption (RVHE)?

The Returning Veterans' Homestead Exemption (35 ILCS 200/15-167) provides a \$5,000 reduction in the equalized assessed value (EAV) of the veteran's principal residence for two consecutive assessment (tax) years, the tax year and the following year that the veteran returns from active duty in an armed conflict involving the armed forces of the United States. The veteran must own and occupy the property as his or her principal residence on January 1 of each assessment year. A veteran who acquires a principal residence after January 1 of the year he or she returns home is eligible for the RVHE on the principal residence owned and occupied on January 1 of the next tax year.

**Note:** For purposes of the exemption, "occupy" means your principal place of dwelling which is "the place where a person has his or her true, fixed permanent home and principal establishment, and to which, whenever he or she is absent, he or she has the intention of returning."

## Who is eligible?

To qualify for this exemption you must

- be an Illinois resident who has served as a member of the U.S. Armed Forces, Illinois National Guard, or U.S. Reserve Forces,
- have returned from active duty in an armed conflict involving the armed forces of the U.S.,
- have owned or had a legal or equitable interest in the land on which a single-family residence is situated and used as your principal place of residence on January 1 of the assessment years, and
- be liable for the payment of the property taxes.

**Note:** A representative can apply on behalf of a deceased veteran who has met the qualifications listed above.

## Is the resident of a cooperative apartment eligible?

To qualify for this exemption, the resident must be

- the owner of record of a legal or equitable interest in the property,
- occupy it as a principal residence, and
- be liable by contract with the owner(s) of record for the property tax payments.

A resident of a cooperative apartment building who has a leasehold interest **does not** qualify for this exemption.

## When will I receive my exemption?

You should apply for this exemption for the assessment year that you return home. The County Board of Review has the final authority to grant your exemption. If granted, your exemption will be applied to the property tax bills paid the two years following the assessment years.

## Can I receive the exemption again?

The exemption applies "only for the tax year and the following tax year in which the veteran returns from active duty in an armed conflict involving the armed forces of the U.S." You may be eligible for this exemption again if you return home from active duty in a subsequent year.

## Do I need to provide documentation?

Your Chief County Assessment Officer (CCAO) will require documentation to verify your eligibility for this exemption.

If you were discharged from active duty service, you must provide

- the original Form DD 214; or
- a copy of Form DD 214 certified by the county recorder, recorder of deed's, IL Dept. of Veterans' Affairs, or the National Archives Record Center.

If you are still on active duty after returning home, you must provide

- Form DD 220; or
- military orders and travel voucher stating that you are returning from an armed conflict involving the armed forces of the U.S. within the tax year that you returned home.

## When and where must I file Form PTAX-341?

You should apply for this exemption for the year when you return from active duty in an armed conflict involving the armed forces of the United States. You must reapply for this exemption if you continue to meet the eligibility requirements and change your principal residence. Contact your CCAO at the address and phone number stated below for assistance and the due date for filing for this exemption. Mail your completed Form PTAX-341 and supporting documentation to the address below.

## If you have any questions, please call:

(815)777-1016

## Mail your completed Form PTAX-341 to:

JO DAVIESS County, Chief County Assessment Officer

330 N BENCH ST  
Mailing address  
GALENA  
City

IL 61036  
ZIP

## Official use. Do not write in this space.

Date received

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Board of review action date

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Verify proof of eligibility \_\_\_\_\_

Approved  Denied for \_\_\_\_\_  
Year veteran returned home

Approved  Denied for \_\_\_\_\_  
Following year

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for denial: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_