



RAILA & ASSOCIATES, P.C.

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Telephone 312-587-9494 Fax 312-376-3118

PROPERTY TAX EVALUATION REQUEST

Reply by E-mail, Fax, Mail or **Via Online Submission**
www.TaxesTooHigh.com service@RailaPC.com

CLIENT/CONTACT INFORMATION

Name _____ E-Mail _____

Mailing Address _____
STREET CITY ZIP

Employer Name _____ Fax #/Location (____) _____

Home Phone (____) _____ Cell # (____) _____ Work#(____) _____

Check Items That Apply

The Client/Contact Person is the ____ Owner ____ Manager ____ Lessee ____ Other (explain) _____

I Learned of Raila PC by: ____ Internet ____ Mailing ____ Postcard ____ Referral ____ Article/Ad

PROPERTY INFORMATION

COUNTY _____ **TOWNSHIP** _____

Full Property Address(es): _____
(use reverse side for additional properties) STREET CITY ZIP

Permanent Index Number(s): _____

Year Purchased: _____ Purchase Price: _____ Appraisal Date/Amount: _____
(if any)

Check Items That Apply

Property is: ____ Owner Occupied ____ Leased ____ Other (Explain) _____

IF owner occupied, which of the following exemptions apply:

____ **Homeowner** ____ **Senior** ____ **Senior Freeze or Long-Time** ____ **Other**

Residential Property

____ **Single-Family Home**; ____ #BRs
____ **Residential Apartments (2-6 units)**; ____ # of units
____ **Mixed-Use Building (2-6 units)**; ____ # of Residential Units
____ # of Commercial Units

Condominiums

#Units ____ Studios ____ 1BRs ____ 2BRs ____ 3BRs ____
____ Commercial Units;
*Appeal as: ____ Individual or ____ Association

Townhomes

#Units ____ 1BRs ____ 2BRs ____ 3BRs ____

Commercial Property

____ **Residential Apartment Building (7+ units)**
If building is mixed use, complete next section also
____ # Stories ____ Studios ____ 1BRs ____ 2BRs ____ 3BRs

____ **Commercial Building**

Total Sq.Ft. ____ # Stores/Offices ____
Used For _____

____ **Industrial Building**

Total Sq.Ft. ____ Used For _____

SIGNATURE

Date



Property Information Form

PLEASE ANSWER ALL QUESTIONS RELATED TO YOUR PROPERTY

Yes or No

1. Did you ***purchase*** the property after January 1, 2014?

If you answered Yes, please complete the following: Purchase Yr _____
Purchase Price? _____

2. If you have an appraisal dated after January 1, 2015, what is the market value? _____

Yes or No

3. Have you ***refinanced*** the property since January 1, 2015?

Yes or No

4. Did you ***build*** the property or add SF after January 1, 2015 _____?

If you answered Yes, please complete the following: Year Built _____
Amount Spent _____

5. What ***percentage*** of the property is owner occupied? 100% ____ 0% ____ Other _____

Yes or No

6. Is this property ***vacant***? If you answered Yes, please complete the following: ____% of vacancy,
or ____ # of vacant units When: _____ Reason: _____

7. State the number of (if applicable): Stories: _____ Residential Units: # _____
Commercial Units: # _____

8. How many Permanent Index Numbers or tax bills are there for this property? _____

Yes or No

9. Have you filed an appeal on your own, with an agency or with another attorney for 2017?

Yes or No

10. Are there any cases pending for this property with the ***Illinois Property Tax Appeal Board (PTAB)***?

11. If this is your primary residence, what year was the oldest owner born? _____

12. Please circle the Status of Appellant (circle only one): [Owner] [Former Owner Liable for Tax]
[Tenant Liable for Tax] [Beneficiary of Trust] [Executor] [Taxing Body or Taxpayer Alleging
Underassessment] [Other]

Comments/Concerns:
