2024 Renewal Application for Senior Citizen Assessment Freeze Exemption This renewal is for households with an annual income below \$65,000 Enter Parcel Number (PIN):

	Enter Parcer Number (r	TIN).			
	Date of Birth:			Phone #: ()
				1 110110 #1 (,
	Property Owner's Name & Address:	form, use you scan the QF Christiance or call (217)		request an	
pro du	e undersigned states that no other application for homoperty in Illinois or any other state. To qualify for the se ring the assessment year, own or have a legal or equit cupied as your principal residence during the assessm	enior citizen table intere	s homestead st in the prop	d exemption you mເ perty on which a sin	ust be 65 years of age or olde gle family residence is
	Senior Citizens Assessr	nent Fr	eeze Inc	ome Informat	ion
	If your spouse maintains a separate residence, has he	e or she app	olied for this	exemption?	_YesNo
	You must include the <u>2023</u> income for you, your sp	oouse, and	all other in	dividuals who live	in the household.
1.	Social Security and SSI benefits. Include Medicare d	leductions i	n this total.		1
2.	Railroad Retirement benefits. Include Medicare dedu	uctions in th	is total.		2
3.	Civil Service benefits				3
4.	Annuities, federally taxable pensions and retirement	plan distrib	utions.		4
5.	Human Services and other governmental cash public	c assistance	e benefits		5
6.	Wages, salaries, and tips from work				6
7.	Interest and dividends received				7
8.	Net rental, farm, and business income or (loss). (See	e instruction	s for Line 8.)	8
9.	Net capital gain or (loss). (See instructions for Line 9	9.)		,	9
	Other income or (loss). (See instructions for Line 10.	•			10
	Add Lines 1 through 10.	•			11
12	Certain subtractions. You may subtract only the repound. Subtraction Item 12a		Amount	ome from	
	Add the amounts on Lines 12a and 12b, and write th	e result.			12
13	Subtract Line 12 from Line 11, and write the result. If the amount is greater than \$65,000, <u>STOP</u> . Yo	This is your	total househ		
an	der penalties of perjury, I state that, to the best of my d complete. <u>If you do not</u> fill out the required income t you <u>will not</u> receive the Senior Citizen Assessment F Date:	information Freeze Exe	you will rec	eive the Senior Citi	
Re	turn application to: Christian County Supervisor o		nents	Please F	Return By: July 1, 2024

 Christian County Supervisor of Assessments 101 S. Main St.
 Taylorville, IL 62568 Please Return By: July 1, 2024
If you have any questions, please call:
(217) 824-5900