

# PTAX-334 Application for Open Space Purposes Assessment

## Who should complete this form?

File this form to request an alternate assessment if your property is more than 10 acres and is used for open space purposes. You must be liable for the property taxes and the property must have been used for open space purposes for the 3 years immediately preceding this assessment year. Property is considered used for open space purposes if it:

- is actually and exclusively used for maintaining or enhancing natural or scenic resources,
- protects air or streams or water supplies,
- promotes conservation of soil, wetlands, beaches, or marshes, including ground cover or planted perennial grasses, trees, shrubs, other natural perennial growth, and any body of water, whether man-made or natural,
- conserves landscaped areas, such as public or private golf courses,
- enhances the value to the public of abutting or neighboring parks, forests, wildlife preserves, nature reservations, sanctuaries, or other open spaces, or
- preserves historic sites.

You must file this form with the chief county assessment officer (CCAO), at the address shown below, by **January 31** in Cook County or by **June 30** in all other counties of each assessment year.

**Note:** When any portion of this property is no longer used for open space purposes, the person liable for taxes **must** immediately notify the CCAO in writing, and will also be required to pay the county treasurer the difference based on the fair cash value of the property in each of the 3 preceding assessment years, plus 5 percent interest. Payment is due **by the following September 1.**

## Step 1: Complete the following information

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

\_\_\_\_\_  
Street address

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
( ) \_\_\_\_\_

Phone \_\_\_\_\_ Email address \_\_\_\_\_

Send notice to (if different than above)

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

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

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
( ) \_\_\_\_\_

Phone \_\_\_\_\_ Email address \_\_\_\_\_

3 Assessment year for which you are requesting this open space purposes assessment. \_\_\_\_\_

4 Date property began to be used for open space purposes. \_\_\_\_/\_\_\_\_/\_\_\_\_

5 Has this property been used for open space purposes for three years preceding this assessment year?  No  Yes

6 Property index number (PIN) of property for which you are requesting this open space purposes assessment. Your PIN is listed on your property tax bill or you may obtain it from the CCAO. If you are unable to obtain your PIN, write the legal description on Line b.

a PIN: \_\_\_\_\_

b Legal description only if unable to obtain your PIN.  
\_\_\_\_\_  
\_\_\_\_\_

7 Total acreage of the property, to the nearest tenth of an acre. \_\_\_\_\_

8 Write the street address of the property, if different than the address in Item 1.

Street address \_\_\_\_\_

City \_\_\_\_\_ IL \_\_\_\_\_ ZIP \_\_\_\_\_

## Step 2: Sign below

Under penalties of perjury, I state that, to the best of my knowledge, the information contained in this application is true, correct, and complete.

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

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Notary public Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Questions, please call: (217) 342-6711

Mail your completed Form PTAX-334 to:  
Effingham County Chief County Assessment Officer

101 N Fourth St Suite 400  
Mailing address  
Effingham IL 62401  
City ZIP

### For use by the CCAO

Do not write in this space.

Attach one copy of this document to the property record card.

Approved:  Yes  No Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date received: \_\_\_\_/\_\_\_\_/\_\_\_\_

Denied:  Yes  No Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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