## PTAX-342 Application for Standard Homestead Exemption for Veterans with Disabilities (SHEVD)

Ste 1	ep 1: Complete the following information	ation	6	Enter the property index number (PIN) of the prop	
	Property owner's name			you are requesting the SHEVD. Your PIN is listed property tax bill or you may obtain it from the Chi	
	Street address of homestead property			Assessment Officer (CCAO). a PIN	
	City S	IL State ZIP		<b>b</b> Enter the legal description only if you are unab	
	() Daytime phone Email address			your PIN. (Attach a separate sheet if needed.)	
Ser	ad notice to (if different than above)				
2	Name		7	What date <b>did you</b> first occupy this property as your principal residence?	
	Mailing address		8	Is any portion of the property used for	Day Year
	City.			commercial purposes or rented to another	
	City S	State ZIP	٥		Yes No
	() Daytime phone Email address		9	Were you a resident of a facility licensed under the Nursing Home Care Act or operated by the U.S. Department of Veterans' Affairs	
3	Enter the assessment year for which you are filing this form.	 Year			Yes 🗆 No
4	Were you liable for paying the property taxes on this property from either January 1st or from the date of occupancy?			<ul> <li>a Enter the name and address of the facility and residency there for this assessment year .</li> </ul>	d the dates of
5	Check your type of residence.	∐ Yes ∐ No			
Ŭ	Single-family dwelling			<b>b</b> Was your property occupied by your spouse?	Yes No
					Yes 🗆 No
	Townhouse		10	Have you received this exemption	
				at another address?	]Yes □No
	U Other			If yes, please list the address:	
				Mailing address	
				City Stat	
Ste	ep 2: Complete the disabled veter	rans' eligibility	y inf	ormation	
11	Are you an Illinois resident?		13	Are you a veteran or the <b>un-remarried</b> surviving	
	Are you a veteran or the <b>un-remarried</b> surviving spouse of a veteran with a disability who served	g		spouse of a veteran with a service-connected disability as certified by the U.S. Department of Veterans' Affairs?	<b>-</b>
	as a member of the U.S. Armed Forces on activ duty or state active duty, Illinois National Guard,	'e	Not	e: You must provide documentation. See "Do I ne	Yes INO
	or U.S. Reserve Forces?	Yes No		umentation?" on the back of this form.	
Ste	ep 3: Complete the following info	rmation			
14a	<b>a</b> Are you the surviving spouse of a deceased veteran?	Yes No	15	If you are claiming the SHEVD on this property fo time, check the type of documentation you are <b>at</b>	
b	If "Yes," were you remarried at the time of occupancy?	Yes No		proof that you have a legal or beneficial title to the	
C	Was the veteran killed in the line of duty?	Yes No		□ Deed       □ Contract for de         □ Trust agreement       □ Other written i	
	Are you a recipient of dependency and indemnity compensation under federal law?	Yes No		Lease Specify:	
e	Enter the veteran's date of death.	_//		a Enter the date the written instrument was executed.	
	Mor	nth Day Year		<b>b</b> If the instrument is recorded, complete the info	ormation below.
				Recorded document number	
				Date document recorded//	ar

	Yes No	
lf	" <b>Yes,</b> " complete Lines a through c.	
а	Name of veteran	Date of death
b	Did you sell your spouse's homestead property that receive	
b		
С	Identify the veteran's homestead property that previously re bill or CCAO.	eceived the SHEVD. You can obtain this information from the property tax
	Property owner's name	
	Street address of homestead property	
	IL           City         State         ZIP	
	PIN	
	**If needed, attach a legal description of the property.	
-	4: Sign below that to the best of my knowledge, the information on this app	lication is true, correct, and complete.
l state	that to the best of my knowledge, the information on this app	lication is true, correct, and complete. //
l state	that to the best of my knowledge, the information on this app	
Property	that to the best of my knowledge, the information on this app	//
state Property Date r	that to the best of my knowledge, the information on this app r owner's or authorized representative's signature Official use. Do ecceived://	//
state Property Date r Ve	that to the best of my knowledge, the information on this app owner's or authorized representative's signature Official use. Do eceived:// rify proof of eligibility	//
Date r	that to the best of my knowledge, the information on this app rowner's or authorized representative's signature Official use. Do eceived:// rify proof of eligibility otion amount	//
State	that to the best of my knowledge, the information on this app rowner's or authorized representative's signature Official use. Do eceived:// rify proof of eligibility otion amount	//
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Date r Date r Date r Exemp Sates Asses EAV o EAV o Total I	that to the best of my knowledge, the information on this app  r owner's or authorized representative's signature  Official use. Do eceived:// rify proof of eligibility otion amount  2,500	// Year not write in this space. Board of review action date:// Approved Denied

## What is the Standard Homestead Exemption for Veterans with Disabilities (SHEVD)?

The SHEVD (35 ILCS 200/15-169) provides an annual reduction in the equalized assessed value (EAV) of a primary residence occupied by a veteran with a disability, or the veteran's qualifying surviving spouse, on January 1 of the assessment year or on a prorated basis during the time of occupancy for the assessment year. The SHEVD amount depends on the percentage of the service-connected disability as certified by the U.S. Department of Veterans' Affairs.

If the veteran has a service-connected disability of 30% or more but less than 50%, then the annual exemption is \$2,500; if the veteran has a service-connected disability of 50% or more but less than 70%, then the annual exemption is \$5,000; and if the veteran has a service-connected disability of 70% or more, then the residential property is exempt from taxation under this Code.

## Who is eligible?

To qualify for the SHEVD, the veteran must

- be an Illinois resident who served as a member of the U.S. Armed Forces on active duty or state active duty, Illinois National Guard, or U.S. Reserve Forces, and who has an honorable discharge;
- have at least a 30 percent service-connected disability certified by the U.S. Department of Veterans' Affairs; and
- own and occupy the property as the primary residence during all or a portion of the assessment year or lease and occupy a single family residence during all or a portion of the assessment year and be liable for the payment of the property taxes to the county.

**Note:** The property's total EAV must be less than \$250,000 after subtracting any portion used for commercial purposes. "Commercial purposes" include any portion of the property rented for more than 6 months.

If you previously received the SHEVD and now reside in a facility licensed under the Nursing Home Care Act or operated by the U.S. Department of Veterans' Affairs, you are still eligible to receive the SHEVD provided your property is occupied by your spouse; or remains unoccupied during the assessment year.

### Is a surviving spouse eligible?

An **un-remarried** surviving spouse of a veteran:

- can continue to receive the SHEVD on the veteran's primary residence, provided the SHEVD had previously been granted to the veteran. The surviving spouse can transfer the SHEVD to another primary residence after the veteran's original primary residence is sold.
- is eligible for the SHEVD on his/her primary residence if the veteran was killed in the line of duty, even if the veteran did not previously qualify or obtain the SHEVD.
- may also qualify for the SHEVD if the veteran did not obtain the SHEVD before death but would have qualified in the taxable year for which the exemption is sought if he or she had survived, the spouse has been a resident of Illinois from the time of the veteran's death through the taxable year for which the exemption is sought, and supporting documentation is obtained and filed with the CCAO.
- is eligible for the SHEVD on his/her primary residence if the veteran's death was determined to be service-connected and the spouse is certified by the U.S. Department of Veterans Affairs as a recipient of dependency and indemnity compensation under federal law, even if the veteran did not previously qualify or obtain the SHEVD.

An **un-remarried** surviving spouse must occupy and hold legal or beneficial title to the primary residence during the assessment year.

## Do I need to provide documentation?

Your Chief County Assessment Officer (CCAO) will require documentation to verify your eligibility for the SHEVD. You must provide documentation from the U.S. Department of Veterans' Affairs for the current assessment year and one of the following documents that is the original or a copy certified by the county recorder, recorder of deeds, Illinois Department of Veterans' Affairs, or the National Archives Record Center.

- Form DD 214 or separation of service from the War Department (military service prior to 1950);
- Certification of Military Service Form; or

• Illinois Driver's license or ID card showing a Veteran's Designation. To request documentation that specifies your percentage of

service-connected disability rating,"
call your local Department of Veteran's Affairs office (or other

- call your local Department of Veteran's Affairs office (or other veteran's assistance office), or
- go online to your Veteran's E-benefit account at **ebenefits.va.gov.** Any other rating is not valid.

An **un-remarried** surviving spouse of a veteran with a disability, who previously received this exemption, must provide the following documents to transfer the SHEVD to themselves or to transfer the SHEVD to a new primary residence:

- the veteran's marriage certificate;
- the veteran's death certificate; and
- proof of ownership.

In the event the veteran was killed in the line of duty, the surviving spouse must **also** provide, in place of the veteran's death certificate, the DD Form 1300, Report of Casualty, issued from the United States Department of Defense. Contact the Department of Veteran's Affairs for assistance in obtaining this form.

If the qualifying veteran has a combined service-connected disability rating of 100% and is deemed to be permanently and totally disabled, as certified by the US Dept. of Veterans Affairs, the veteran who has been granted this exemption is not required to annually reapply for the exemption, and the exemption shall remain in effect for as long as would have otherwise been permitted. The qualifying veteran must file a Summary of Benefits letter with the CCAO to verify the proper ratings.

#### When will I receive my exemption?

The year you apply for the SHEVD is referred to as the assessment year. The county board of review, while in session for the assessment year, has the final authority to grant your SHEVD. If granted, your SHEVD will be applied to the property tax bill paid the year following the assessment year. The exemption will be prorated if the property is occupied for only a portion of the assessment year.

### When and where do I file my Form PTAX-342?

You (including an **un-remarried** surviving spouse applying for the first time or for a new primary residence) should file your Form PTAX-342 with your CCAO by the due date to receive this exemption. Contact your CCAO at the address and phone number below for assistance and filing information with your county.

**Note:** To continue receiving the SHEVD on your residence, you must file Form PTAX-342-R, Annual Verification of Eligibility for Standard Homestead Exemption for Veterans with Disabilities, each year with your CCAO unless specifically exempted by law.

	County, CCAO
Mailing address	
	IL
City	ZIP
If you have any questions, call (	)

# Are there other homestead exemptions available for a person with a disability?

**Yes.** However, only one of the following homestead exemptions may be claimed on your property for a single assessment year:

- Veterans with Disabilities Exemption
- Homestead Exemption for Persons with Disabilities
- Standard Homestead Exemption for Veterans with Disabilities