

Vacancy/Occupancy Affidavit

Cook County Board of Review

2024 Complaint No: _____

PIN: _____

Township: _____

STATE OF ILLINOIS }
COUNTY OF COOK } SS

I, _____, being first duly sworn, on oath depose and say that I am the owner/managing agent of the property located at _____ (ADDRESS) in _____ (CITY), subject of the above complaint, and that I have personal knowledge that the occupancy of the building(s) for the year _____ is as follows:

Condos or Apartments (Please circle)

	Total Sq. Ft. of Commercial Area Occupied	Total Sq. Ft. of Commercial Area Vacant	Total Sq. Ft. of Commercial Area	Total Number Occupied	Total Number Vacant	Total Number	Monthly Rent or Asking Rent (Please Circle)
January							
February							
March							
April							
May							
June							
July							
August							
September							
October							
November							
December							
Total							

Total annual percent weighted vacancy of commercial space

Total annual percent weighted vacancy of apartments

(Please check all boxes that apply)

- Photos of the vacant space are included with this appeal
- Photos of the vacant space are not included because: _____

- Attempts to lease the vacant space were made. _____
(list all attempts made to lease vacant space)

- No attempts were made to lease the vacant space because: _____

(Evidence of such attempt must be attached)

Subscribed and sworn before me,
This _____ day of _____, 20____
Notary Public or Board Deputy

Further affiant sayeth not.

Affiant