

KANE COUNTY BOARD OF REVIEW
719 BATAVIA AVE
GENEVA, IL 60134

NOTICE OF APPEAL TO THE ILLINOIS PROPERTY TAX APPEAL BOARD

ROMANO, DEAN
227 N. FOURTH ST.
GENEVA, IL 60134

RE: PROPERTY NAME & MAILING ADDRESS
DELNOR COMMUNITY HOSPITAL
NORTHWESTERN MEMORIAL HEALTHCARE
211 E ONTARIO ST STE 1400
CHICAGO, IL 606113274

NOV 25 2020

The following is a notice that the above referenced property owner has filed an appeal to the Illinois Property Tax Appeal Board. The property owner is requesting a change in value of over \$100,000.

Following Appeal has been filed to Property Tax Appeal Board, requesting a change of assessed valuation of \$446,772.

This notice is sent to all Taxing Districts of the Property.

Docket Number	19-02279.001-C-3	Filing Date	11/19/2020
Parcel Number	12-05-476-017	Hearing Date	
Parcel Year	2019		
Property Class	0060		
Tax Code	GE005		

Original Value	\$2,746,542
Requested Value	\$2,299,770

Change Reason Fair Market Value - Appraisal

Such decrease is being sought through an appeal to the Illinois Property Tax Appeal Board by the property owners. This notification is in accordance with Illinois Property Tax Code 35 ILCS 200/16.180.

Attached is a copy of the appeal to the Illinois Property Tax Appeal Board. The referenced Taxing Districts shall have the opportunity to be heard concerning this appeal.

If there are any questions concerning this appeal, please contact the Kane County Assessment Office.

POST MARKED

OCT 14 2020

AMENDED COMMERCIAL APPEAL**State of Illinois - Property Tax Appeal Board****Assessment Year 2019 (Complete)**See page 4 for instruction; also, information on how to complete this form can be found at www.ptab.illinois.gov **PROPERTY TAX APPEAL BOARD - SPRINGFIELD****Assessment Year appeals BEFORE 2016: submit 3 copies of completed form: 2 copies of board of review final decision OR 2 copies of a favorable prior PTAB decision; and 2 copies of all evidence. For assessment changes of \$100,000 or more, submit all evidence in triplicate.****Assessment Year appeals for 2016 and AFTER: submit 1 copy EACH of completed form; board of review final decision OR a favorable prior PTAB decision; and all evidence. If the total documentation is 500 pages or more, you must submit three collated sets of the documents.****Section I****HEARING OPTIONS – If neither box is checked, your appeal may be decided based on the evidence submitted. PLEASE CHECK ONE:**

- ☐ I would like the PTAB to determine the correct assessment based on the evidence submitted (This may expedite resolution of the appeal.)
- ☒ I would like to present my case in person at a hearing. (Note: Location, date, and time will be determined by PTAB.)

Section II**Appellant (Taxpayer or Owner) Information**

Last Name Delnor Community Health Care
 Foundation
 First Name _____
 Address Line 1 211 E. Ontario, Suite 1800
 Address Line 2 _____
 City Chicago
 State IL ZIP 60611
 Telephone (312) 580-2223
 Email Address _____

Information on Attorney for Appellant

Last Name Cullerton
 First Name Patrick
 Firm Name Thompson Coburn
 Address Line 1 55 E. Monroe
 Address Line 2 37th Floor
 City Chicago
 State IL ZIP 60603
 Telephone (312) 580-2223
 Email Address RGroup@thompsoncoburn.com

1a Petition is hereby made to appeal for the property located in Kane County from:a) The final, written decision of the County Board of Review dated 2/14/2020 or transmittal date of (Cook County only) filed in compliance with 35 ILCS 200 /16-160.)**OR**

b) The favorable decision of the Property Tax Appeal Board (PTAB) dated: _____

2a Parcel Number 12-05-476-017-0000 Township Geneva
Address of Property 296 S. Randall Road, Geneva **OCT 16 2020**2b If the appellant is other than owner, give name and address of owner. Name _____
Address Line 1 _____ Address Line 2 Property Tax Appeal
City _____ State Board, IL ZIP _____2c Assessment(s) of the property for the assessment year by parcel number:
(Use the "Addendum to Petition" form for multiple parcels found at www.ptab.illinois.gov along with special instructions if 50 parcels or more.)

1. Board of Review Assessment:	Land	<u>765,490</u>	Impr./Building	<u>1,981,052</u>	Total	<u>2,746,542</u>
2. Appellant Assessment Request:	Land	<u>765,490</u>	Impr./Building	<u>1,500,950</u>	Total	<u>2,266,440</u>

ALWAYS complete lines 1 and 2 above for the assessment year being appealed. Line #1 information is available from the Supervisor of Assessments/County Assessor or the Board of Review offices, or may be on the Notice itself.

2d This appeal is based on the following evidence (you must check all applicable boxes):

- ☐ Recent Sale - complete Section IV ☐ Assessment equity - complete Section V
- ☐ Comparable Sales - complete Section V ☐ Recent Construction - complete Section VI
- ☒ Contention of Law - submit Legal Brief ☒ Recent appraisal (enclose complete copy(s) of the appraisal)

Evidence:

- ☐
- I certify this completed form along with enclosed evidence completes my filing.

2e Date October 14, 2020
PTAB10A (rev 03/19)Signature Patrick J. Cullerton
Attorney or Appellant only

NOTE: IF AN APPRAISAL IS SUBMITTED SECTIONS III THROUGH VII DO NOT NEED TO BE COMPLETED.

Section III - Description of Property

Land Size (indicate square feet or acres): 326,700

Number of Buildings: _____ Building Size (square feet): 67,269

Number of Floors: _____ Square Footage per Floor: _____

Construction ☐ Frame ☐ Brick ☐ Steel ☐ other _____

Basement ☐ Yes ☐ No ☐ Basement Use: _____

Other Improvements _____

List the use of the building and the square footage attributable to that use:

Office Space: ☐ Yes ☐ No ☐ Square Footage: _____

Warehouse: ☐ Yes ☐ No ☐ Square Footage: _____

Apartments ☐ Yes ☐ No ☐ Number of Apartments: _____

Retail: ☐ Yes ☐ No ☐ Square Footage: _____

Other: _____ ☐ Square Footage: _____

If there is more than one building on this parcel, provide the following information:

Building #1	Age	_____	Size	_____	Use	_____
Building #2	Age	_____	Size	_____	Use	_____
Building #3	Age	_____	Size	_____	Use	_____

Section IV - Recent Sale Data

Generally, the price of a recently sold property is considered the best evidence of value. The more proximate in time the sale occurs to the assessment date of your appeal, the more relevant the evidence becomes in establishing the market value of the property.

SUBMIT DOCUMENTATION of the actual sales prices (submit copies of all that are available) including a sales contract, Real Estate Transfer Declaration, listing data sheet, listing history, and Settlement Statement.

Answer all questions.

Full consideration (sale price): _____ Date of sale _____

From whom purchased: _____

Is the sale of this property a transfer between family members or related corporations? ☐ yes ☐ no

Sold by: ☐ Owner ☐ Realtor ☐ Auction ☐ Other: _____

Name of realty firm: _____ Agent: _____

Was this property advertised for sale? ☐ yes ☐ no How long of a period? _____

If so, in what manner? ☐ local paper ☐ multiple listing other: _____

Was this property sold during a foreclosure action? ☐ yes ☐ no

Was this property sold using a contract for deed? ☐ yes ☐ no If yes, specify the date the contract was entered: _____

If renovated, amount spent before occupying \$ _____ Date occupied: _____

Section V - Comparable Sales/Assessment Equity Grid Analysis

As an alternative, an appraisal establishing the fair market value of the subject property under appeal as of the assessment date may also be submitted. (Note: If a hearing is held in this case, the PTAB will be better able to judge the weight and credibility of the appraisal if your appraiser testifies in person.)

Comparable Sales: Provide at least three recent sales of property comparable to the subject property. Complete the entire grid analysis (except assessment data). Include the dates of sale and prices paid. Submit a property record card and/or listing sheet of each sale. (Note: Comparable sales should be similar to the subject property in location, size, design, age, and amenities.)

Assessment Equity: Provide at least three properties similar to the subject property and include the assessment of each property for the assessment year on appeal. Complete the entire grid analysis (except sale data). Submit a property record card and/or listing sheet of each sale. (Note: Assessment comparables should be similar to the subject property in location, size, design, age, and amenities.)

In addition to the above instructions, print additional blank copies of this page and renumber columns if submitting more than three comparable properties. All comparables should be similar to the subject property in location, size, design, age, and amenities. Photographs should be submitted if they aid in explaining the appeal.

	Subject	Comp #1	Comp #2	Comp #3
Property Index Number (P.I.N.)				
Address				
Proximity to Subject (Cook County)				
Assessment Class (Cook County)				
Volume				
Total Land Sq. Ft.				
Total Building Sq. Ft.				
Age of Building(s)				
Land-to-Building Ratio				
Number of Buildings				
Number of Stories				
Number of Apartments				
Apartment Mix				
Exterior Construction				
Sprinkler System				
Office Space Sq. Ft.				
Warehouse Sq. Ft.				
Date of sale				
Sales price				
Sales price / Sq. Ft. (Sale price/ bldg. size)				
Land assessment				
Improvement assessment				
Total Assessment				
Impr. Assessment per sSq. Ft. (Impr. Assessment / Bldg. Sq. Ft.)				

Section VI - Recent Construction Information

Submit evidence of recent construction of the subject property including the price paid for the land, construction costs of the buildings(s), and include all labor costs. Include the complete and final statement from the general contractor. NOTE: If the appellant provided any labor or acted as general contractor, evidence of the value of this service should be included with the evidence of the other construction costs.

The building was constructed, or remodeled, an addition added, or other building erected on _____

Date Land Purchased _____

Total Cost: Land \$ _____ Improvements \$ _____

Does this amount include all costs incurred for the construction, such as contractor's fees, architectural or engineering fees, landscaping and/or building permits? ☐ yes ☐ no

Date the occupancy permit was issued. (Submit copy(s) as directed.): _____

Date the building was inhabitable and fit for occupancy or intended use: _____

Date the remodeling was completed: _____

Date the addition or other building(s) was completed: _____

Did owner or member of owner's family act as the general contractor? ☐ yes ☐ no

If yes, what was the estimated value of the service?

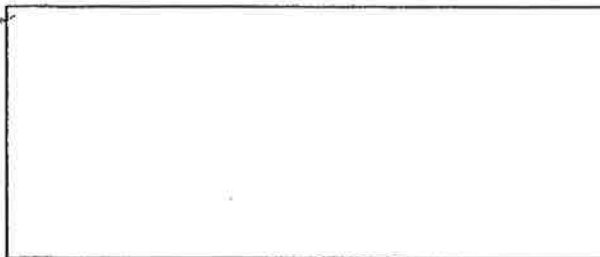
Was any non-compensated labor performed? ☐ yes ☐ no

If yes, please describe and provide an estimated value of the labor _____

Note: A Contractor's Affidavit/Statement or documentation of the total cost must be submitted to the Property Tax Appeal Board.

Section VII - Recent Photograph(s) of the Subject Property and Comparable Properties

If it aids in explaining the appeal, you may submit a page or pages with a photograph of the subject property and comparable properties.



File completed appeal form with documentation postmarked within 30 days of the date of the final board of review decision OR within 30 days of the date of the favorable PTAB decision.

Mail or hand deliver completed appeal to:
Room 402 Stratton Office Building
401 South Spring Street
Springfield, IL 62706-4001
(T) 217.782.6076
(TTY) 800.526.0844

Only for hand-delivery of completed appeal:
Suburban North Regional Office Facility
9511 West Harrison Street, Suite LL-54
Des Plaines, IL 60016-1563
(T) 847.294.4121