



Property Tax Assessment Freeze Program Certificate of Rehabilitation Application

Submit with Part 2 via: Rev. 6/20
[https://filet.illinois.gov/filet/
PIMupload.asp](https://filet.illinois.gov/filet/PIMupload.asp) and designate
the recipient as
SHPO.Freeze@illinois.gov

PART 2 Description of Rehabilitation Plan, Sheet _____

Property name _____ Street address _____ City _____

| Item Number _____ | Architectural feature _____ | Approximate date of feature _____ |
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Describe existing feature and its condition

Photo numbers _____ Drawing numbers _____

Describe work and impact on feature

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