

## VILLAGE OF GLENCOE

## FORMS & APPLICATIONS

675 Village Court, Glencoe, Illinois 60022 p: (847) 835-4111 | info@villageofglencoe.org | Follow Us: @VGlencoe

Last Updated: February 28, 2019

www.villageofglencoe.org

## **Address Change Request**

This is a fillable PDF form. You may the complete the form electronically, then save and print, mail or deliver your completed application to the department listed at the end of this form.

#### **Section A: Policy**

Village staff will consider requests of property owners to modify street addresses under limited and specific circumstances. Because street addresses are the primary method used as identifying property for Village-based routine and emergency data bases, and the delivery of routine and emergency Village services, address changes should be granted only under limited circumstances when the request will not cause undue disruption to, or confusion in, the delivery of Village services. Any costs related to such a change are fully borne by the requestor.

#### Section B: Process

Address Change Requests are to be submitted in writing defining the specific basis for the request.

Only the current property owner may file an Address Change Request. An Address Change Request requires the submission of an executed Address Change Hold Harmless Agreement (page 2).

An Address Change Request will require the posting of a non-refundable \$500 fee to review the matter. In addition, if an Address Change Request is granted, the applicant will pay \$1,500 for the cost of modification, revision, and dissemination of the address change in the various data sources contingent upon the delivery of Village services.

A Village staff interdepartmental committee will review the Address Change Request. Modification may be granted based on the determination of the interdepartmental committee. Examples of specific circumstances warranting consideration include, but are not limited to:

- Existing number is out of sequence
- · Current address does not match the front door location (such as on corner lots)
- · Address modification based on subdivision or consolidation

All Address Change Requests are to be filed with the Building & Zoning Administrator who will coordinate the review process and notification of determination. If an address change request is approved, the Village will provide the applicant a letter directed to the U.S. Postal Service - Glencoe, indicating the approval of the address change. The applicant is required to make all address change notifications.

Under no circumstances may an address change be requested within five years after the granting of a previous address change request. In addition, the Village reserves the right to alter further an address, at the Village's cost, if the Village determines that the public health, safety and welfare will be advanced by such further revision.

#### **Section C: Address Change Hold Harmless Agreement**

To the fullest extent permitted by law, I,	("Owner"), as o	wner of the property
presently addressed as	, Glencoe (the "Property"), Illinois agree to o	defend, indemnify, and
hold harmless the Village of Glencoe, its officials,	officers, agents, employees, attorneys, and repr	resentatives (the
"Village Parties") against any and all injuries, dea	iths, loss, damages, claims, patent claims, suits, l	liabilities, judgments,
decrees, orders, costs, and expenses (collectively	, "Claims"), which may in anyway accrue against	t any of the Village
Parties arising in whole or in part out of, in conse	quence of the modification of the street address	s for the Property as
requested by Owner.		
Owner shall, at Owner's sole expense, appear, de	efend, and pay all charges and fees of attorneys a	and all cost and other
expenses arising as a result of or incurred in conr	nections with any such Claim. If any judgment sh	all be rendered against
any of the Village Parties in connection with any	Claim, Owner shall, at Owner's sole expense, sat	isfy and discharge the
same.		
Section D: Acknowledgement and Signa	ature	
IN WITNESS THEREOF,		
this agreement is executed on this	day of	, 20
Name (print):		
Address:		
Phone Number:		
Signature:		
Witness		

#### Please mail or deliver this form with any supporting material to:

Building and Zoning Village of Glencoe 675 Village Court Glencoe, Illinois 60022

Phone: (847) 835-4111 | Fax: (847) 835-4234 | E-mail: <u>publicworks@villageofglencoe.org</u>



## **Cook County Treasurer**

#### **CHANGE OF TAXPAYER NAME OR MAILING ADDRESS**

Date:	-		
Property Index Number (PI	N):		
Do not exceed the spaces on th	is form. Leave a space in betw	veen names, streets, abbreviations, etc.	
NAME(S)			
MAILING ADDRESS (Include	Jnit Number, if needed)		
CITY		STATE	
ZIP + 4	PH:	ONE	
EMAIL			
CHAIL	PRO	<b>OPERTY LOCATION</b> (If different from ab	ove):
Upon oath, and under penalties of per County Treasurer that I am the legal, I property, and that I possess the actual	peneficial or equitable owner, trustee	affirm, represent, warrant and certify to the Office of agent for the owner or trustee for the above cap execute this instrument.	of the Cook otioned real
(Signature of applicant)		Printed name of applicant)	
SUBMIT BY MAIL (THE APPLI	CATION MUST BE NOTARIZE	D)	
S.S.: State of	Cou	inty of	
I, a notary public, in and for the state a personally known to me to be the s County Real Estate Tax Bill, appeared free and voluntary act for the uses and	ame person who executed the for before me this day in person, ar	fy that egoing Application for Change of Name or Addres nd executed the foregoing document, under oath,	s of Cook as his/her
Notary Public	Date	My Commission Expires	
IMPRINT NOTAR	Y STAMP HERE	Cook County Treasurer Name Change Department 118 N. Clark Street – Room 112	

#### **SUBMIT IN PERSON**

Chicago, IL 60602

## COOK COUNTY ASSESSOR FRITZ KAEGI



COOK COUNTY ASSESSOR'S OFFICE
118 NORTH CLARK STREET, CHICAGO, IL 60602
PHONE: 312.443.7550
WWW.COOKCOUNTYASSESSOR.COM

# **Property Location Correction Form**

Please use this form if a change in the property location address is required.

			_
Property Index Number(	(s)		
		·	
Owner / Taxpayer			Daytime Phone Number
Property Street Address			Township
Dity	State	Zip	_
Requested by	## B ######		Date
71110			
IHIS	FORM WIL	L NOT CH	IANGE THE MAILING ADDRESS.
		FOR O	FFICE USE ONLY