

# UNOFFICIAL COPY

## HOME IMPROVEMENT GRANT AGREEMENT

0010573637

5984/0007 87 006 Page 1 of 31  
2001-06-29 10:35:48  
Cook County Recorder 81.00

**THIS AGREEMENT**, made this 19<sup>th</sup>  
day of June 2001  
by \_\_\_\_\_ and \_\_\_\_\_  
between  
Alfred Strauss



(hereinafter "**OWNER**"), and the  
VILLAGE OF SKOKIE, (hereinafter  
"**VILLAGE**") an Illinois municipal  
corporation located at 5127 Oakton  
Street, Skokie, Illinois. The  
**VILLAGE** and **OWNER** shall jointly  
be referred to as "Parties".

**COOK COUNTY  
RECORDER  
EUGENE "GENE" MOORE  
SKOKIE OFFICE**

### WITNESSETH:

**WHEREAS**, the **VILLAGE** operates a Housing Improvements Program (hereinafter "Program") to financially assist low and moderate income Skokie homeowners with various home repairs in order to maintain the quality of their homes and reduce home energy consumption; and

**WHEREAS**, eligible home improvements for the Program include, but is not limited to, improvements which are visible to the public, improve the neighborhood, and are life/safety issues such as correcting basement flooding, most weatherization work, roof repairs or replacement, tuckpointing, exterior painting, furnace repair or replacement and major structural repairs; and

**WHEREAS**, normal home maintenance such as interior painting, carpeting, or kitchen remodeling or other decorating projects are not eligible home improvements under the Program; and

**WHEREAS**, **OWNER** of the property commonly known as 8240 Crawford in Skokie, Illinois of which legal description is attached hereto, marked exhibit "1",

submitted an application to the **VILLAGE** requesting to participate in the Program, a copy of which is attached hereto, marked Exhibit "2" and hereby made a part of this **AGREEMENT**; and

**WHEREAS**, the **VILLAGE** caused an inspection of the subject premises to verify the need for the requested work and provided the **OWNER** with an inspection report, a copy of which is attached hereto, marked Exhibit "3" and hereby made a part of this **AGREEMENT**; and

**WHEREAS**, the subject premises is a residential property improved with either a single-family home, condominium, townhouse, two-flat or cooperative located within the **VILLAGE**; and

**WHEREAS**, the **VILLAGE** has reviewed the aforesaid application and has determined that the **OWNER'S** participation in the Program is in the **VILLAGE'S** best interest and is in

..ODMA\PCDOCS\IVOSDOCS\382911



Box 429

31



# CHICAGO TITLE INSURANCE COMPANY

400 S. JEFFERSON, CHICAGO, IL 60607

EXHIBIT 4

(312) 223-2582

## TRACT INDEX SEARCH

VILLAGE OF SKOKIE  
5127 OAKTON  
SKOKIE, ILLINOIS 60077  
TERRY OLIVE

CTIC Order No.: 1401 S9552016 SP  
Cover Date: JUNE 5, 2001  
Ref: 8240 CRAWFORD AVE

MM/EB

Legal Description of Land Searched: (See Attached)

Permanent Tax Number (P.I.N.):  
10-22-415-023-0000

Street Address of Land Search (as furnished by Applicant):  
8240 CRAWFORD AVENUE  
SKOKIE, ILLINOIS

Grantee(s) in last recorded conveyance:

C.T. AND T. CO. TR UTA DATED 05/08/69, TRUST NUMBER 53657

In accordance with the application, a search of tract indices discloses the following items. With respect to residential properties, we may not have shown mortgages, trust deeds, or other liens which were eliminated by transactions closed through CTIC or Chicago Title and Trust Company.

DOCUMENT/CASE NO.:	2087509.
GRANTOR:	JOHN DINELLI & (WF) BETTY M.
GRANTEE:	C.T. & T.CO., TR UTA DTD 05/08/69, TR#53657
INSTRUMENT:	DT
DATE:	05/08/69
RECORDED:	06/18/69
REMARKS:	---

CHICAGO TITLE INSURANCE COMPANY

By: *Erika Banks*

SEE ATTACHED FOR TERMS AND CONDITIONS OF SEARCH AND EXPLANATION OF ABBREVIATIONS  
This is not a title insurance policy, guarantee, or opinion of title and should not be relied upon as such.

TRIND1 EU



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## CHICAGO TITLE INSURANCE COMPANY

400 S. JEFFERSON, CHICAGO, IL 60607

### TRACT INDEX SEARCH

Additional Tax Numbers:

Order No.: 1401 S9552016 SP

#### Legal Description:

LOT 141 IN TALMAN & THIELE'S CRAWFORD-NILES CENTER SUBDIVISION, A SUBDIVISION OF LOTS 1, 2, 5 AND 6 IN SUBDIVISION OF LOTS 2 AND 3 IN SUPERIOR COURT PARTITION OF THE SOUTHWEST 1/4 OF SECTION 23 AND THE EAST 1/2 OF THE SOUTHEAST 1/4 OF SECTION 22, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office

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accordance with the objectives of the Program;

**NOW, THEREFORE**, in consideration of the premises set forth above, and the mutual agreements hereinafter set forth below, it is hereby agreed:

1. Representations. The representations set forth in the foregoing recitals are material to this **AGREEMENT** and are hereby incorporated into and made part of this **AGREEMENT** as though they were fully set forth in their entirety in this Section 1.

2. Definitions. As used in this **AGREEMENT**, the following definitions shall apply:

Inspection Report: A document prepared on behalf of the **VILLAGE** based on an examination of the Subject Premises which specifies home improvement work which is eligible for a Grant under the Program.

Project: All of the home improvement work covered under the Grant from the **VILLAGE**.

Subject Premises: The property commonly known as 8240 Crawford, Skokie, Illinois which is the **OWNER's** principal residence.

Work: The undertaking of labor by a contractor approved by the **VILLAGE** to accomplish the home improvements specified in Exhibit "3".

3. Issuance of Grant. Pursuant to **OWNER's** participation in the Program, the **VILLAGE** agrees to provide **OWNER** with a grant in an amount not to exceed EIGHT THOUSAND AND NO/100 DOLLARS (\$8,000) ("Grant") to pay for materials and contractor's fees for the Project and related Work.

4. Documentation. **OWNER** represents that he or she is the legal title holder to Subject Premises. In further proof thereof **OWNER** has submitted to the **VILLAGE**:

- a. Title policy or Letter of Opinion from Chicago Title and Trust Company; or
- b. Torrens Certificate; or
- c. if legal title is in a Trust, a certified copy of the Trust Agreement, letter of direction and certification as to the current beneficiary under such Trust Agreement. A copy of the submitted document(s) is/are attached hereto, marked Exhibit "4", collectively, and hereby made a part of this **AGREEMENT**.

5. Financial Eligibility. **OWNER** represents to the **VILLAGE** that **OWNER's** total annual household income does not exceed the very low income limits established by the Federal Government as specified in Exhibit "5" attached hereto and hereby made a part of this **AGREEMENT**. In further proof thereof **OWNER** has submitted the following documents to the **VILLAGE**:

- a. **OWNER's** Federal Income Tax Forms 1040/1040A with attachments, supplementary forms and scheduled for all person (18 years old or older)

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contributing to **OWNER's** household income for the two previous calendar years;  
and

- b. An Affidavit of Income; and
- c. An Income Disclosure Statement. Copies of the submitted document are attached hereto, marked Exhibit "6", "7" and "8" respectively and hereby made a part of this **AGREEMENT**.

6. Homeowner's Representation. The Grant shall be issued to **OWNER** by the **VILLAGE'S** reliance upon all information provided by the **OWNER** and all representations, exhibits, data and other materials submitted with and in support of **OWNER's** participation in the Program. Any misinformation or withholding of material information incident thereto shall, at the option of the **VILLAGE**, give rise to the **VILLAGE'S** right to terminate this **AGREEMENT** pursuant to Section 16 of this **AGREEMENT**.

7. Priority of Improvements. The work to be performed shall be conducted in the following priority, subject to the approval of the **VILLAGE**:

- a. Work required to correct existing code violations;
- b. Exterior home improvements;
- c. All other home improvements.

8. Permits. **OWNER** is responsible for securing and paying for all necessary licenses and permits for the Project.

9. Multiple Bids. **OWNER** agrees to obtain at least three (3) bids from qualified contractors for each project and work item. **OWNER** shall be required to utilize the Contractor who has submitted the lowest bid, unless otherwise approved by the **VILLAGE**.

10. No Prior Agreements. **OWNER** has represented to the **VILLAGE** that no prior agreements have been entered into between the owner and any contractor for the project and work to be performed under this **AGREEMENT**.

11. Contracts. **OWNER** must provide the **VILLAGE** with a copy of any and all contracts for the Project and Work to be completed. The contracts must be approved in writing by the **VILLAGE**. No modifications may be made to Village approved contracts without the prior written consent of the **VILLAGE**.

12. Completion of Work. Upon completion of the Project and Work, **OWNER** shall deliver to the **VILLAGE** a contractor's waiver of lien and a certificate executed by the contractor or subcontractor, stating that the Project and Work is final and complete and is in compliance with all applicable federal, state and local laws, rules and regulations.

13. Payment to Contractors. The Parties agree that payments to the contractors shall not occur until the **VILLAGE** has inspected the completed Project and Work and provides the **OWNER** with written approval for payment.

14. Additional Documents. **OWNER** shall supply the **VILLAGE** with such other materials, documents and papers which the **VILLAGE** may require, from time to time.

15. Homeowner Sale of Subject Property. If the **OWNER** sells the Subject Premises or any interest in it is sold or transferred, within 15 years after receipt of grant funds **OWNER**

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expressly agrees to pay the **VILLAGE** back for the entire Grant or a portion thereof based on the following schedule:

YEAR FROM RECEIPT OF GRANT FUNDS	PERCENTAGE OF GRANT OWED VILLAGE
0-5	100%
6	50%
7	45%
8	40%
9	35%
10	30%
11	25%
12	20%
13	15%
14	10%
15	5%

16. **Termination.** This Agreement may be terminated at the **VILLAGE'S** option by written notice to the **OWNER** upon the occurrence or any one or more of the following events:
- Construction of the Project has not commenced within ninety (90) days of the date of this **AGREEMENT**.
  - If any statement or representation made by **OWNER** in its application to the **VILLAGE** shall prove untrue in any material respect, or if the **OWNER** shall have withheld any material information incident thereto.

Delay in the exercise of the **VILLAGE'S** right to terminate shall not be construed as a waiver of any such right to terminate with regard to the occurrence of any specific event referred to above, and the **VILLAGE'S** failure to act as to any such event shall not be construed as a waiver of its rights with respect to any subsequent event of default.

17. **The Village Not a Joint Venturer.** The **VILLAGE** by executing this **AGREEMENT** or any action taken pursuant hereto or contemplated hereby shall not be deemed to be a partner or joint venturer with **OWNER** or Contractor or any other parties. **OWNER** indemnifies and holds the **VILLAGE** harmless from any and all liabilities, damages, claims, demands, costs and expenses resulting from such a construction of the Parties and their relationship. Any inspection of the Subject Premises or any analysis of the Project made by the **VILLAGE** is intended solely for the benefit of the **VILLAGE** and shall not be deemed to create or form the

h:\data\legal\agrmnts\homelow.txt

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basis of any warranty, representation, covenant, implied promise or liability to the **OWNER** or its employees or agents, any guest or invitee upon the Subject Premises or any other person.

18. Indemnification. The **OWNER** hereby agrees and covenants to forever hold harmless and indemnify the **VILLAGE** its officers, employees and agents, and to save them from and indemnify for all costs, claims, suits, demands, and actions arising during the term of this **AGREEMENT** directly or indirectly from or because of or in any way connected with this **AGREEMENT** that may be made by **OWNER**, its guests, invitees, or any other person, firm, corporation or organization, for property damage or injury. The provisions of this Section 18 shall survive the expiration or termination of this **AGREEMENT**.

19. Recording of AGREEMENT. A copy of this **AGREEMENT** shall be recorded against the Subject Premises at the office of the Cook County Recorder of Deeds.

20. Multiple Homeowners. If more than one person has an ownership in the Subject Premises, each person is fully and personally obligated to keep all of the promises made in this **AGREEMENT**, including the promise to pay the full amount owed.

21. Notices. All notices required or to be given pursuant hereto shall be in writing and either delivered personally or by a nationally recognized "over-night" courier service or mailed by United States certified or registered mail, postage prepaid, addressed to Seller and Purchaser as follows:

If to **VILLAGE**: Village of Skokie  
5127 Oakton Street  
Skokie, IL 60077  
Attention: Village Clerk

With copies to: Village Manager  
5127 Oakton Street  
Skokie, IL 60077

Corporation Counsel  
5127 Oakton Street  
Skokie, IL 60077

If to **OWNER**: Alfred Strauss

8240 Crawford

Skokie, IL 60076

Notices shall be deemed effective and properly delivered and received when and if either;

- a. personally delivered;
- b. delivered by Federal Express or other overnight courier; or
- c. deposited in the U.S. Mail, by registered or certified mail, return receipt requested, postage prepaid.

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Either Party may change the names and addresses of the persons to whom notices or copies thereof shall be delivered, by written notice to the **VILLAGE** or **OWNER** or Seller, as the case may be, in the manner herein provided for the service of notice.

22. Entire Binding Understanding; No Oral Modification. All prior understandings and agreements between the Parties are merged into this **AGREEMENT**.

23. Performance. Time is of the essence in this **AGREEMENT**.

24. Severability. Each provision of this **AGREEMENT** is severable from all other provisions of this **AGREEMENT** and, if one or more of the provisions of this **AGREEMENT** shall be declared invalid, the remaining provisions of this **AGREEMENT** shall nevertheless remain in full force and effect.

25. Headings. The headings or titles of the Sections or Paragraphs in this **AGREEMENT** are for convenience only, are not a part of this **AGREEMENT**, and shall not be used as an aid in the construction of any provisions hereof.

26. Due Authority. Each Party signing this **AGREEMENT** represents and warrants that they have full right and authority to enter into and perform this **AGREEMENT** in accordance with the terms hereof.

**VILLAGE OF SKOKIE,**

**OWNER,**

By: \_\_\_\_\_

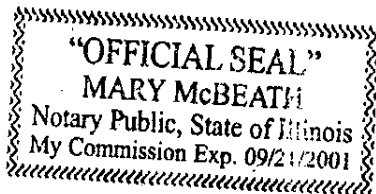
Albert J. Rigoni  
Its Village Manager

By: \_\_\_\_\_

Alfred Strauss

Subscribed and sworn to before me  
this 25th day of June, 2001

Notary Public





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EXHIBIT "I"

The premises improved with a brick residence know as  
8240 Crawford, Skokie, Illinois, and legally described  
as Lots 141 & 142 in Tallman and Thieles Crawford Niles  
Center Sub. of Lots 1, 2, 5 and 6 in the Sub East 1/4 of  
Section 22, with the South West 1/4 of Section 23, Twp. 41 N.,  
Range 13 E of the 3rd P.M. in Cook County Illinois

Property of Cook County Clerk's Office

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EXHIBIT "2"

## VILLAGE OF SKOKIE

### HOUSING IMPROVEMENT PROGRAM

#### APPLICATION

##### Section 1 - Applicant Information

Name:

A;fred Strauss

Address:

8240 Crawford -Skokie, Il 60076

Telephone:

Home 847-679-2023

Work

847-933-0139 (unlisted)

Total Household Income:

No. of Persons in Household

1

##### Section 2 - Eligibility Statement

PROGRAM APPLICANTS MUST MEET THE FOLLOWING ELIGIBILITY CRITERIA IN ORDER TO PARTICIPATE IN THE SKOKIE HOME IMPROVEMENT PROGRAM

1. The program applicant's total household income may not exceed the moderate and low household income limits established by the Federal Government;
2. The program applicant must be a Skokie resident and must live in and own the home to be improved or repaired; and
3. The program applicant's home, which is to be improved, must be a single-family house, townhouse, condominium, cooperative, etc.

##### Section 3 - Required Information

This application cannot be processed until all of the documents and information listed below are provided. Since all applications will be processed on a first-come first-serve basis, it is extremely important that the applicant provide the documents and information as quickly as possible.

1. Tax Form 1040/1040A Submitted? Yes xx No      N.A.       
Including all supplementary forms, schedules and attachments for each household member 18 years old or older who contributed to your household income.
2. Affidavit of income submitted? Yes xx No
3. Income disclosure statement? Yes xx No

(-9-)

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4. Village Home Inspection Report? Yes xxx No xxx

5. Three (3) bids from contractors for improvement work specified in the energy audit or Village Inspection?

Yes 6 No Coming

6. Proof of Home Ownership?

Yes            No Coming

7. Grant/Loan amount requested?

\$ \$8000.

Section 4 - Statement of Applicant Understanding.

As an applicant for the Village of Skokie Housing Improvement Program, I understand that:

1. The Village will give me a maximum grant amount of \$8,000 to complete eligible home improvement work if I am certified as a low-income applicant and funds are available. I will not be liable to repay this grant unless I have violated the program requirements.
2. Approval of my application by the Village as a moderate income applicant does not assure that I will be eligible for a loan from a lending institution participating in the program.
3. The Village will only subsidize the interest rate on a housing improvement loan made to me by a local lending institution participating in this program and that I am totally responsible, as the applicant, for repaying the loan to the lending institution. The Village will not in anyway insure the repayment of my loan.
4. The Village will subsidize the interest on a maximum loan of \$8,000 down to Zero (0) percent interest on a four (4) year loan if I am certified as a moderate income participant.
5. It is my responsibility to hire a contractor to complete the improvement work for which the grant/loan is approved and to pay the contractor once the work is certified as completed by the Village of Skokie Building Department.
6. The Village will in no way warrant or guarantee any of the work performed and it is my responsibility to determine the acceptability of all material used and work performed by the contractor.
7. I consent to and authorize the Village and/or lender, after the giving of reasonable notice to enter the improved property for the sole purpose of determining that the improvements specified in this application have been completed. The Village's inspection of the work will be to certify completion only, no determination will be made as to the quality or adequacy of material or workmanship; and,
8. The Village has no responsibility or liability for damages or injury of any kind occurring as a result of my participation in this program.

Section 5 - Signature

I hereby state that I have read, understand and consent to all of the above conditions that the information given by me is completed and is correct to the best of my knowledge, and that I have not knowingly made any false statements concerning this application.

Alma Shaw  
Applicant's Signature

6/4/2009  
Date

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Property of Cook County Clerk's Office

CASE TYPE  
 Property Index Number  
 ADDRESS  
 GRANT-LOAN PROGRAM  
 10-22-415-023-0000  
 8240 CRAWFORD AVE  
 SKOKIE IL 60076

DATE ESTBL  
 INSPECTOR  
 4/24/01  
 CARL CELESTINO

STATUS  
 TENANT NAME  
 ACTIVE

STATUS DATE  
 TENANT NBR  
 4/24/01

CASE DATA:  
 CITATION NUMBER #1.....  
 DATE/TIME OF VIOLATION #1.....  
 CITATION NUMBER #2.....  
 DATE/TIME OF VIOLATION #2.....  
 CITATION NUMBER #3.....  
 DATE/TIME OF VIOLATION #3.....  
 TYPE OF USE.....  
 GRANT OR LOAN.....  
 MISCELLANEOUS.....

NARRATIVE: INTERVIEW 4-24-01 ROOF, TREE, AND PARKING SURFACE  
 UNLISTED# 933 0139 4/24/01 4/24/01

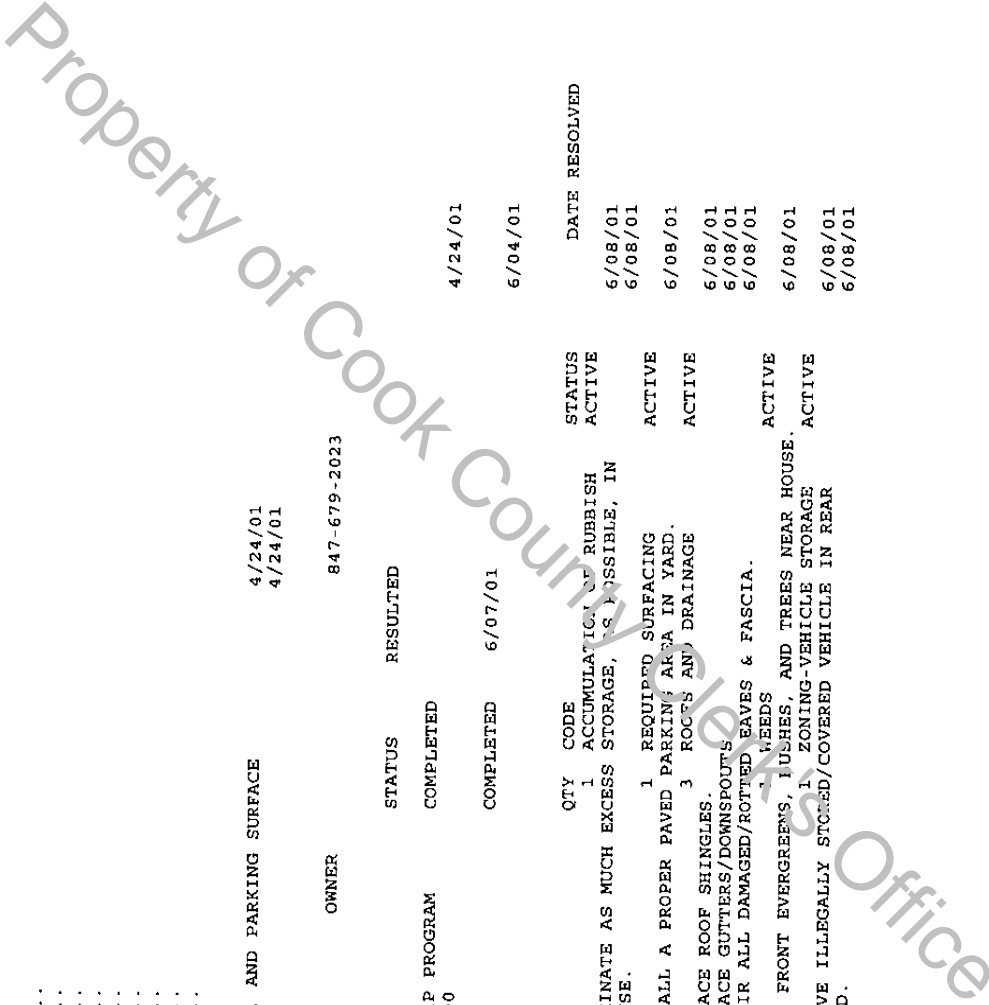
NOTICE NAMES: ALFRED STRAUSS OWNER 847-679-2023

HISTORY:

SCHEDULED ACTION	STATUS	RESULTED	DATE
4/24/01 OWNER MEETING HIP PROGRAM NARRATIVE: 11:00	COMPLETED		4/24/01
6/07/01 INSPECTION RST TEXT: 9:00	COMPLETED	6/07/01	6/04/01

VIOLATIONS:

DATE	DESCRIPTION	QTY	CODE	STATUS	DATE RESOLVED
6/07/01	306.1 NARRATIVE: ELIMINATE AS MUCH EXCESS STORAGE, AS POSSIBLE, IN HOUSE.	1	ACCUMULATION OF RUBBISH	ACTIVE	6/08/01
6/07/01	11.11.6 NARRATIVE: INSTALL A PROPER PAVED PARKING AREA IN YARD.	1	REQUIRED SURFACING	ACTIVE	6/08/01
6/07/01	304.7 NARRATIVE: REPLACE ROOF SHINGLES. REPLACE GUTTERS/DOWNSPOUTS REPAIR ALL DAMAGED/ROTTED EAVES & FASCIA.	3	ROOF'S AND DRAINAGE	ACTIVE	6/08/01
6/07/01	303.4 NARRATIVE: TRIM FRONT EVERGREENS, BUSHES, AND TREES NEAR HOUSE.	1	WEEDS	ACTIVE	6/08/01
6/07/01	11.18.1.7 NARRATIVE: REMOVE ILLEGALLY STORED/COVERED VEHICLE IN REAR YARD.	1	ZONING-VEHICLE STORAGE	ACTIVE	6/08/01



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EXHIBIT 3

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JUN 15 2001 10

## ASSIGNMENT OF BENEFICIAL INTEREST

This is to certify that the above and foregoing is a true and correct copy of the original now held in our files

Date 5/8/91

CHICAGO TITLE LAND TRUST COMPANY

OCT 26 1992

FOR VALUE RECEIVED, the undersigned assignor(s) hereby sell, assign, transfer, and set over unto ALFRED STRAUSS

*Carolyne Paul*  
*(11/19/91)*

assignee(s), all of the assignor's rights, power, privileges, and beneficial interest in and to that certain trust agreement dated the 2<sup>nd</sup> day of MAY, 1969, and known as Chicago Title and Trust Company Trust Number 53657 including all interest in the property held subject to said trust agreement.

The real property constituting the corpus of the land trust is located in the municipality(ies) of SKOKIE in the county(ies) of COOK, Illinois.

signature(s) of assignor(s)

(include Social Security and/or Employer's Identification numbers)

<u><i>Alfred Strauss</i></u>	SSN or EIN <input checked="" type="checkbox"/>	<u>319-03-2823</u>
<u><i>Ernie Strand</i></u>	SSN or EIN <input checked="" type="checkbox"/>	<u>464-07-5994</u>
_____	SSN or EIN _____	_____
_____	SSN or EIN _____	_____

### ACCEPTANCE BY ASSIGNEE

The undersigned assignee(s) accept the foregoing assignment subject to all the provisions of said trust agreement.

signature(s) of assignee(s)

(include Social Security and/or Employer's Identification numbers)

<u><i>Alfred Strauss</i></u>	SSN or EIN <u>353-14-0416</u>
address <u>8240 CRAWFORD SKOKIE, ILL.</u>	phone <u>708-679-2023</u>
_____	SSN or EIN _____
address _____	phone _____
_____	SSN or EIN _____
address _____	phone _____

### RECEIPT BY TRUSTEE

Received a duplicate of the foregoing assignment and acceptance.

Date OCT 23 1992

CHICAGO TITLE AND TRUST COMPANY by *Carolyne Paul*  
Assistant Vice President

(Before lodging an executed copy of this assignment with the trustee, compliance should be had with the appropriate transfer tax regulations.)

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OCT 27 1992

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## FACSIMILE ASSIGNMENT OF BENEFICIAL INTEREST for purposes of recording

Date 5/8/91

FOR VALUE RECEIVED, the assignor(s) hereby sell, assign, transfer, and set over unto assignee(s), all of the assignor's rights, power, privileges, and beneficial interest in and to that certain trust agreement dated the 8<sup>th</sup> day of MAY 1969, and known as Chicago Title and Trust Company Trust Number 53657 including all interest in the property held subject to said trust agreement.

The real property constituting the corpus of the land trust is located in the municipality(ies) of SKOKIE in the county(ies) of COOK, Illinois.

Exempt under the provisions of Paragraph e, Section 4, Land Trust  
Recordation and Transfer Tax Act.

Signature [Handwritten Signature] Date 5/8/91  
[Handwritten Signature] Date 5/8/91

DEPT-01 RECORDING \$25.00  
T#4444 TRAN 9863 10/27/92 09:53:00  
#3845 # \*-92-796764  
COOK COUNTY RECORDER

Not Exempt - Affix transfer tax stamps below.

VILLAGE of SKOKIE, ILLINOIS  
Economic Development Tax  
Village Code Chapter 10  
EXEMPT Transaction  
Skokie Office

22/OCT/92

This instrument was prepared by  
This document should be mailed to

Alfred Frank  
MARCO BRAUSS  
8240 CRAWFORD  
SKOKIE, IL 60076

Filing instructions:

- 1) Record this document with the Recorder of the county in which the real estate held by this trust is located.
- 2) Deliver the recorded original or a stamped copy to the trustee along with the original assignment to be lodged.

25.00

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# Village of Skokie



P.O. Box 309 • 5127 Oakton St. • Skokie, Ill. 60076 • (708) 673-0500

## REAL ESTATE TRANSFER TAX

Check Appropriate Boxes

- RESIDENTIAL
- COMMERCIAL INDUSTRIAL
- MULTI-UNIT NO. of UNITS \_\_\_\_\_
- EXEMPTION

Recorder or Registrar's Deed No.	92796264
Date Recorded	OCT 27 1992
(For Recorder's Use Only)	

### INSTRUCTIONS:

- This form must be filled out completely, signed by at least one of the grantees (buyers), signed by at least one of the grantors (sellers), and presented to the Village of Skokie, 5127 Oakton Street, Skokie, Illinois 60077, or other designated agent, at the time of purchase of real estate transfer stamps as required by the Village of Skokie Economic Development Tax Ordinance. The stamps must be affixed to the deed, and this form attached, when the title is recorded.
- The full actual amount of consideration of the transaction is the amount upon which the tax is to be computed. Both the full actual consideration of the transaction and the amount of the tax stamps required must be stated on the declaration.
- In cases involving an intermediary buyer, nominee or "straw man," one declaration form must be prepared for each deed that is to be recorded. One of these transactions is usually exempt under Section 10.06 (E) of the Ordinance.
- A signed copy of the Illinois Tax Declaration form must be sent to the Village of Skokie, pursuant to Section 10.09 of the ordinance, by the grantee (buyer) of any deed or assignee of beneficial interest within ten days after delivery of the deed or assignment of beneficial interest.**
- For additional information, please call the Village Hall at 673-0500, Monday thru Friday, 8:30 A.M. to 5:00 P.M.

Address of Property 8240 CRAWFORD STREET, SKOKIE, IL 60076  
 Permanent Property Index No. 10-22-40-023/024  
 Date of Deed 10/92 Type of Deed TRUST AGREEMENT

Full Actual Consideration (Include amount of mortgage and value of liabilities assumed)	\$ _____
Amount of Tax (\$3.00 per \$1,000 or fraction thereof of full actual consideration) Payment of tax is obligation of seller	\$ _____

Note: The Village of Skokie Economic Development Tax Ordinance specifically exempts certain transactions from taxation. These exemptions are enumerated in Sections 10.06 and 10.07 of the ordinance which are printed on the reverse side of this form. A real estate transfer stamp is required. To claim one of these exemptions, complete the appropriate blanks below:

I hereby declare that this transaction is exempt from taxation under the Village of Skokie Economic Development Tax Ordinance by paragraph(s) \_\_\_\_\_ of Section \_\_\_\_\_ of said Ordinance.

Details for exemption claimed: (explain) TRANSFERRING BENEFICIAL INTEREST IN TRUST FROM EDGAR G. STOWELL/ EUNICE STOWELL TO ALFRED STRAUSS

Approved by Village of Skokie [Signature] Date: 10/22/92

We hereby declare the full actual consideration and above facts contained in this declaration to be true and correct.

Grantor: (Please Print) (Seller) Edgar G. Stowell / Eunice Stowell SKOKIE, IL  
8240 CRAWFORD 60076  
 Signature EDGAR G. STOWELL / EUNICE STOWELL Address 8240 CRAWFORD Zip Code 60076  
 Seller or Agent Date Signed \_\_\_\_\_

Grantee: (Please Print) (Buyer) Alfred Strauss 8240 CRAWFORD SKOKIE 60076  
 Signature ALFRED STRAUSS Address 8240 CRAWFORD Zip Code 60076  
 Buyer or Agent Date Signed \_\_\_\_\_

(Please Print) (Prepared by) ALFRED STRAUSS Street Address 8240 CRAWFORD SKOKIE, IL  
 City State Zip \_\_\_\_\_ Telephone Number 679-2023 60076



# UNOFFICIAL COPY

ASSIGNMENT OF BENEFICIAL  
INTEREST OF LAND TRUST  
ONLY  
COOK COUNTY



RECORDING FEE

REVENUE STAMPS

OCT 27 1992

Date \_\_\_\_\_  
 Det. No. \_\_\_\_\_  
 92796764  
 For Recorder's Use Only

### REAL ESTATE TRANSFER DECLARATION

Except as to Exempt Transactions, you are prohibited by law from accepting any deed for recordation unless it is accompanied by a declaration containing all of the information requested therein.

FULL NAME OF TITLE HOLDING TRUST AND TRUST NUMBER Please print or type

1-10-53657 CHICAGO TITLE + TRUST CO  
CRAWFORD LAND TRUST

Permanent Real Estate Index No. 10-22-415-023/024 Date of Assignment: 5/2/91

Address of Property 8240 CRAWFORD SKOKIE IL 60076  
Street or Rural Route Zip Code  
City or Village NILES Township

LEGAL DESCRIPTION: Sec. 23 Twp. #1 Range 13  
(Use additional sheet, if necessary) NILES

This space for relating any special facts or circumstances involving this transaction: (Use additional sheet, if necessary).

LOTS 141-142  
IN TALLMAN + THIELER  
SECTION CRAWFORD  
NILES CENTER SUB. OF  
LOTS -1-2-5-6 IN THE  
SUB. OF LOTS 2-3 IN  
SUPERIOR COURT PARTITION  
(SEE ATTACHED)

Full cash consideration	\$ 27,825.00
Less amount of personal property included in transfer	\$ -
Net consideration for tax purposes	\$ 27,825.00
Less amount of mortgage or other debt which the transferred real estate remains subject	\$ 27,825.00
Net taxable consideration to be covered by stamps	\$ 0
Amount of tax stamps (\$2.25 per \$100 or part thereof of taxable consideration)	\$ 0

We hereby declare the full actual consideration and above facts contained in this declaration to be true and correct.

EDGAR + EUNICE STOWELL 8240 CRAWFORD SKOKIE IL  
Name and Address of Seller (Please Print) - LENDER Street or Rural Route Zip Code City

Edgar + Eunice Stowell  
Signature: Seller or Agent - LENDER

ALFRED STRAUSS 8240 CRAWFORD SKOKIE IL  
Name and Address of Buyer (Please Print) - BORROWER Street or Rural Route Zip Code City

Alfred Strauss  
Signature: Buyer or Agent - BORROWER

Use space below for tax mailing address, if different from above.

Name Street or Rural Route Zip Code City

4

AMENDMENT OF TRUST AGREEMENT

JUN 0 8 1989

Whereas, Chicago Title and Trust Company, Trustee under the terms of a certain agreement dated MAY 8, 1969 and known as Trust Number 53657, is presently holding the record title to certain real estate;

And, whereas, the undersigned beneficiaries own the beneficial interest in said trust;

And, whereas, said trust in accordance with the provisions thereof, terminates twenty years from the date of said agreement;

And, whereas, it is the desire of the undersigned to extend the term of said trust for an additional twenty years;

Now, therefore, for and in consideration of the sum of one dollar and other good and valuable consideration, receipt and sufficiency of which is hereby acknowledged, the undersigned hereby agree that said trust shall continue under the same terms and conditions for an additional twenty years, except however, that the compensations of the Trustee for signing deeds and other instruments shall be its current schedule of charges for services. In addition, the Trustee shall receive each year in advance for continuing to hold title to the real estate an annual fee equal to the fee charged by the Trustee prior to the date of this amendment, or a fee as determined by the Trustee's then current rate schedule, such final fee determination to be made in the sole discretion of the Trustee. Any real estate conveyed of record to the Trustee subsequent to the date of this amendment shall not be subject to this agreement unless the Trustee shall issue its written acceptance thereof.

In witness whereof, the beneficiaries have set their hands and seals, and the Trustee has caused these presents to be executed by its Assistant Vice President, attested by its Assistant Secretary and its corporate seal attached, on the 8th day of June, 1989.

signature(s) of beneficiary(ies)  
(include Social Security and/or Employer's Identification numbers):

Edgar G. Stowell SSN or EIN 319-03-2823  
EDGAR G. STOWELL  
address 16386 Stonebridge Blvd., Boca Raton, FL phone 407-479-3268

Eunice Stowell SSN or EIN 464-07-5994  
EUNICE STOWELL  
address 10386 Stonebridge Blvd., Boca Raton, FL phone 407-479-3268

SSN or EIN \_\_\_\_\_  
address \_\_\_\_\_ phone \_\_\_\_\_

CHICAGO TITLE AND TRUST COMPANY

By Cherita Smith  
Assistant Vice President

By Shirley Davenport  
Assistant Secretary

UNOFFICIAL COPY Amen

AMENDMENT

0010573637

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SEP 14 1983

holder of a 100% beneficial interest in CHICAGO TITLE AND TRUST COMPANY land trust number 53657 which is dated 5-8-69 and having the power to amend the survivorship provisions of said trust agreement, EDGAR G. STOWELL & M. EUNICE STOWELL does hereby amend all existing provisions for the transfer of the beneficial interest AFTER DEATH, by substituting the following in lieu thereof:

In the event of the death of the survivor of EDGAR G. STOWELL & M. EUNICE STOWELL during the existence of this trust, all such right, title, or interest not previously assigned or otherwise disposed of shall vest in

ALFRED STRAUSS

[Multiple blank lines for additional names]

if then living.

All other terms and provisions of said trust agreement are hereby confirmed and remain in full force and effect.

DATED: SEPTEMBER 9, 1983

Edgar G. Stowell
EDGAR G. STOWELL

M. Eunice Stowell
M. EUNICE STOWELL

DATED THIS DAY: SEP 20 1983

CHICAGO TITLE AND TRUST COMPANY
BY: Monica Sanders
ASSISTANT VICE PRESIDENT

ATTEST: [Signature]
ASSISTANT SECRETARY

JUN 9 1969

# This Trust Agreement,

# UNOFFICIAL COPY

19. 69 and known as Trust Number 53657 is to certify that the CHICAGO TITLE AND TRUST COMPANY, a corporation of Illinois as trustee hereunder, is about to take title to the following described real estate in Skokie, Cook County, Illinois, to-wit:

Lots 141 and 142 in Tallman and Thieles Crawford Niles Center Sub-division of Lots 1, 2, 5 and 6 in the subdivision of Lots 2 and 3 in Superior Court Partition of the East half of the South East quarter of Section 22 with the South West quarter of Section 23, Township 41 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois;

otherwise known as No. 6240 Crawford, Skokie, Illinois and that when it has taken title thereto, or to any other real estate deeded to it as trustee hereunder, it will hold it for the uses and purposes and upon the trusts herein set forth. The following named persons shall be entitled to the earnings, avails and proceeds of said real estate according to the respective interests herein set forth, to-wit:

Edgar G. Stowell and E. Eunice Stowell, his wife, as joint tenants with right of survivorship and not as tenants in common.

IT IS UNDERSTOOD AND AGREED between the parties hereto, and by any person or persons who may become entitled to any interest under this trust, that the interest of any beneficiary hereunder shall consist solely of a power of direction to deal with the title to said property and to manage and control said property as hereinafter provided, and the right to receive the proceeds from rentals and from mortgages, sales or other disposition of said premises, and that such right in the avails of said property shall be deemed to be personal property, and may be assigned and transferred as such; that in case of the death of any beneficiary hereunder during the existence of this trust, his or her right and interest hereunder shall, except as herein otherwise specifically provided, pass to his or her executor or administrator, and not to his or her heirs at law; and that no beneficiary now has, and that no beneficiary hereunder at any time shall have any right, title or interest in or to any portion of said real estate as such, either legal or equitable, but only an interest in the earnings, avails and proceeds as aforesaid. The death of any beneficiary hereunder shall not terminate the trust nor in any manner affect the powers of the trustee hereunder. No assignment of any beneficial interest hereunder shall be binding on the trustee until the original or a duplicate of the assignment is lodged with the trustee and accepted by the trustee and every assignment of any beneficial interest hereunder, the original or duplicate of which shall not have been lodged with and accepted by the trustee, shall be void as to all subsequent assignees or purchasers without notice.

Nothing contained in this agreement shall be construed as imposing any obligation on the trustee to file any income, profit or other tax reports or schedules, it being expressly understood that the beneficiaries from time to time will individually make all such reports, and pay any and all taxes, required with respect to the earnings, avails and proceeds of said real estate or growing out of their interest under this trust agreement.

In case said trustee shall make any advances of money on account of this trust or shall be made a party to any litigation on account of holding title to said real estate or in connection with this trust, or in case said trustee shall be compelled to pay any sum of money on account of this trust, whether on account of breach of contract, injury to person or property, fines or penalties under any law or otherwise, the beneficiaries hereunder do hereby jointly and severally agree that they will on demand pay to the said trustee, with interest thereon at the rate of 7% per annum, all such disbursements or advances or payments made by said trustee, together with its expenses, including reasonable attorneys' fees, and that the said trustee shall not be called upon to convey or otherwise deal with said property at any time held hereunder until all of said disbursements, payments, advances and expenses made or incurred by said trustee shall have been fully paid, together with interest thereon as aforesaid. However, nothing herein contained shall be construed as requiring the trustee to advance or pay out any money on account of this trust or to prosecute or defend any legal proceeding involving this trust or any property or interest thereunder unless it shall be furnished with funds sufficient therefor or be satisfactorily indemnified in respect thereto. In the event the Trustee is served with process or notice of legal proceedings or of any other matter concerning the trust or the trust property, the sole duty of the Trustee in connection therewith shall be to forward the process or notice by first class mail to the person designated herein as the person to whom inquiries or notices shall be sent or, in the absence of such designation, to the beneficiaries. The last address appearing in the records of the Trustee shall be used for such mailing.

It shall not be the duty of the purchaser of said premises or of any part thereof to see to the application of the purchase money paid therefor; nor shall any one who may deal with said trustee be required or privileged to inquire into the necessity or expediency of any act of said trustee, or of provisions of this instrument.

This trust agreement shall not be placed on record in the Recorder's Office of the county in which the land is situated, or elsewhere, however the recording of the same shall not be considered as notice of the rights of any person hereunder, derogatory to the title or powers of said trustee.

The Trustee may at any time resign by sending by registered mail a notice of its intention so to do to each of the then beneficiaries hereunder at his or her address last known to the Trustee. Such resignation shall become effective ten days after the mailing of such notices by the Trustee. In the event of such resignation, a successor or successors may be appointed by the person or persons then entitled to direct the Trustee in the disposition of the trust property, and the Trustee shall thereupon convey the trust property to such successor or successors in trust. In the event that no successor in trust is named as above provided within ten days after the mailing of such notices by the Trustee, then the Trustee may convey the trust property to the beneficiaries in accordance with their respective interests hereunder, and the deed of conveyance may be recorded or registered, as the case may be, by the Trustee, or the Trustee may, at its option, file a bill for appropriate relief in any court of competent jurisdiction. The Trustee notwithstanding such resignation shall continue to have a first lien on the trust property for its costs, expenses and attorneys' fees and for its reasonable compensation.

(Over)

PROPERTY OF COOK COUNTY RECORDER'S OFFICE

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JUN 9 - 1969

# This Trust Agreement,

dated this 8th day of May 1969

UNOFFICIAL COPY TA

1969 and known as Trust Number 53657 is to certify that the CHICAGO TITLE AND TRUST COMPANY, a corporation of Illinois as trustee hereunder, is about to take title to the following described real estate in Skokie, Cook County, Illinois, to-wit:

Lots 141 and 142 in Tallman and Thieles Crawford Niles Center Sub-division of Lots 1, 2, 5 and 6 in the subdivision of Lots 2 and 3 in Superior Court Partition of the East half of the South East quarter of Section 22 with the South West quarter of Section 23, Township 41 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois;

otherwise known as No. 3240 Crawford, Skokie, Illinois and that when it has taken title thereto, or to any other real estate deeded to it as trustee hereunder, it will hold it for the uses and purposes and upon the trusts herein set forth. The following named persons shall be entitled to the earnings, avails and proceeds of said real estate according to the respective interests herein set forth, to-wit:

Edgar G. Stowell and M. Eunice Stowell, his wife, as joint tenants with right of survivorship and not as tenants in common.

IT IS UNDERSTOOD AND AGREED between the parties hereto, and by any person or persons who may become entitled to any interest under this trust, that the interest of any beneficiary hereunder shall consist solely of a power of direction to deal with the title to said property and to manage and control said property as hereinafter provided, and the right to receive the proceeds from rentals and from mortgages, sales or other disposition of said premises, and that such right in the avails of said property shall be deemed to be personal property, and may be assigned and transferred as such; that in case of the death of any beneficiary hereunder during the existence of this trust, his or her right and interest hereunder shall, except as herein otherwise specifically provided, pass to his or her executor or administrator, and not to his or her heirs at law; and that no beneficiary now has, and that no beneficiary hereunder at any time shall have any right, title or interest in or to any portion of said real estate as such, either legal or equitable, but only an interest in the earnings, avails and proceeds as aforesaid. The death of any beneficiary hereunder shall not terminate the trust nor in any manner affect the powers of the trustee hereunder. No assignment of any beneficial interest hereunder shall be binding on the trustee until the original or a duplicate of the assignment is lodged with the trustee and accepted by the trustee and every assignment of any beneficial interest hereunder, the original or duplicate of which shall not have been lodged with and accepted by the trustee, shall be void as to all subsequent assignees or purchasers without notice.

Nothing contained in this agreement shall be construed as imposing any obligation on the trustee to file any income, profit or other tax reports or schedules, it being expressly understood that the beneficiaries from time to time will individually make all such reports, and pay any and all taxes, required with respect to the earnings, avails and proceeds of said real estate or growing out of their interest under this trust agreement.

In case said trustee shall make any advances of money on account of this trust or shall be made a party to any litigation on account of holding title to said real estate or in connection with this trust, or in case said trustee shall be compelled to pay any sum of money on account of this trust, whether on account of breach of contract, injury to person or property, fines or penalties under any law or otherwise, the beneficiaries hereunder do hereby jointly and severally agree that they will on demand pay to the said trustee, with interest thereon at the rate of 7% per annum, all such disbursements or advances or payments made by said trustee, together with its expenses, including reasonable attorneys' fees, and that the said trustee shall not be called upon to convey or otherwise deal with said property at any time held hereunder until all of said disbursements, payments, advances and expenses made or incurred by said trustee shall have been fully paid, together with interest thereon as aforesaid. However, nothing herein contained shall be construed as requiring the trustee to advance or pay out any money on account of this trust or to prosecute or defend any legal proceeding involving this trust or any property or interest thereunder unless it shall be furnished with funds sufficient therefor or be satisfactorily indemnified in respect thereto. In the event the Trustee is served with process or notice of legal proceedings or of any other matter concerning the trust or the trust property, the sole duty of the Trustee in connection therewith shall be to forward the process or notice by first class mail to the person designated herein as the person to whom inquiries or notices shall be sent or, in the absence of such designation, to the beneficiaries. The last address appearing in the records of the Trustee shall be used for such mailing.

It shall not be the duty of the purchaser of said premises or of any part thereof to see to the application of the purchase money paid therefor; nor shall any one who may deal with said trustee be required or privileged to inquire into the necessity or expediency of any act of said trustee, or of provisions of this instrument.

This trust agreement shall not be placed on record in the Recorder's Office of the county in which the land is situated, or elsewhere, however the recording of the same shall not be considered as notice of the rights of any person hereunder, derogatory to the title or powers of said trustee.

The Trustee may at any time resign by sending by registered mail a notice of its intention so to do to each of the then beneficiaries hereunder at his or her address last known to the Trustee. Such resignation shall become effective ten days after the mailing of such notices by the Trustee. In the event of such resignation, a successor or successors may be appointed by the person or persons then entitled to direct the Trustee in the disposition of the trust property, and the Trustee shall thereupon convey the trust property to such successor or successors in trust. In the event that no successor in trust is named as above provided within ten days after the mailing of such notices by the Trustee, then the Trustee may convey the trust property to the beneficiaries in accordance with their respective interests hereunder, and the deed of conveyance may be recorded or registered, as the case may be, by the Trustee, or the Trustee may, at its option, file a bill for appropriate relief in any court of competent jurisdiction. The Trustee notwithstanding such resignation shall continue to have a first lien on the trust property for its costs, expenses and attorneys' fees and for its reasonable compensation.

(Over)

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Every successor Trustee or Trustee appointed hereunder shall become fully vested with all the estate, properties, rights, powers, trusts, duties and obligations of the trust, his or their predecessors.

It is understood and agreed by the parties hereto and by any person who may hereafter become a party hereto, that said Chicago Title and Trust Company will deal with said real estate only when authorized to do so in writing, and that (notwithstanding any change in the beneficiary or beneficiaries hereunder) it will, on the written direction of

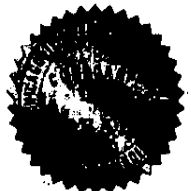
Edgar G. Stowell and M. Eunice Stowell, his wife,

or will on the written direction of such other person or persons as shall be from time to time named in writing by the beneficiary or beneficiaries, or on the written direction of such person or persons as may be beneficiary or beneficiaries at the time, make deeds for, or otherwise deal with the title to said real estate, provided, however, that the trustee shall not be required to enter into any personal obligation or liability in dealing with said land or to make itself liable for any damages, costs, expenses, fines or penalties, or to deal with the title so long as any money is due to it hereunder. Otherwise, the trustee shall not be required to inquire into the propriety of any such direction.

The beneficiary or beneficiaries hereunder, in his, her or their own right shall have the management of said property and control of the selling, renting and handling thereof, and said trustee shall have no duty in respect to such management or control, or the collection, handling or application of such rents, earnings, avails or proceeds, or in respect to the payment of taxes or assessments or in respect to insurance, litigation or otherwise, except on written direction as hereinabove provided, and after payment to it of all money necessary to carry out said instructions. No beneficiary hereunder shall have any authority to contract for or in the name of the trustee or to bind the trustee personally. If any property remains in this trust twenty years from this date it shall be sold at public sale by the trustee on reasonable notice, and the proceeds of the sale shall be divided among those who are entitled thereto under this trust agreement.

The Chicago Title and Trust Company shall receive for its services in accepting this trust and in taking title hereunder the sum of \$50.00, also the sum of \$20.00 per year for holding title after the 8th day of May 1970, so long as any property remains in this trust; also its regular schedule fees for making deeds, and it shall receive reasonable compensation for any special services which may be rendered by it hereunder, or for taking and holding any other property which may hereafter be deeded to it hereunder, which fees, charges or other compensation, the beneficiaries hereunder jointly and severally agree to pay.

IN TESTIMONY WHEREOF, the Chicago Title and Trust Company has caused these presents to be signed by its Assistant Vice President and attested by its Assistant Secretary, and has caused its corporate seal to be hereto attached as and for the act and deed of said corporation, the day and date above written.



CHICAGO TITLE AND TRUST COMPANY,

Assistant Vice-President
Assistant Secretary

And on said day the said beneficiaries have signed this Declaration of Trust and Trust Agreement in order to signify their assent to the terms hereof.

Edgar G. Stowell (SEAL)
M. Eunice Stowell (SEAL)

Address 11 W. Illinois St., Chicago, Ill.

Address 11 W. Illinois St., Chicago, Ill.

Address
Address

May the name of any beneficiary be disclosed to the public? No

Refer written inquiries and legal notices by first class mail to the named beneficiaries.

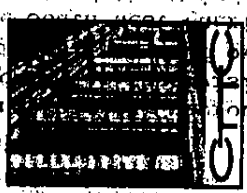
May oral inquiries be referred directly? No To whom?

To whom shall bills be mailed? Mr. & Mrs. Edgar G. Stowell, 11 W. Illinois St., Chicago, Ill.

Trust Agreement

DECLARATION OF TRUST

CHICAGO TITLE AND TRUST COMPANY



Filed May 8 1970
Trust No. 53637

Form 124 R-4-65

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VILLAGE OF SKOKIE  
HOUSING IMPROVEMENTS PROGRAM  
INCOME LIMITS

<u>No. of Persons in Household</u>	<u>GRANT</u>	<u>LOAN</u>
		Zero (0) Percent Interest
1	\$23,750	\$35,150
2	\$27,150	\$40,150
3	\$30,550	\$45,200
4	\$33,950	\$50,200
5	\$36,650	\$54,200
6	\$39,400	\$58,250
7	\$42,100	\$62,250
8	\$44,800	\$66,250

**NOTE:** HOUSEHOLD INCOME IS THE TOTAL INCOME OF ALL HOUSEHOLD MEMBERS EIGHTEEN (18) YEARS OR OLDER WHO CONTRIBUTE TO THE HOUSEHOLD.

**SOURCE:** HUD SECTION 8 PROGRAM INCOME LIMITS FOR THE CHICAGO, SMSA, EFFECTIVE 02/01/00 REVISED.

# UNOFFICIAL COPY

Department of the Treasury - Internal Revenue Service

EXHIBIT 6

Form **1040**

**U.S. Individual Income Tax Return 1998**

(99) IRS use only - Do not write or staple in this space.

For the year Jan 1-Dec 31, 1998, or other tax year beginning 1998, ending 19 OMB No. 1545-0074

**Label**  
(See instructions.)

Your First Name <b>Alfred</b>	MI	Last Name <b>Strauss</b>	Your Social Security Number <b>353-14-0416</b>
If a Joint Return, Spouse's First Name	MI	Last Name	Spouse's Social Security Number

**Use the IRS label.**  
Otherwise, please print or type.

Home Address (number and street). If You Have a P.O. Box, See Instructions. <b>8240 Crawford</b>	Apartment No.	<b>▲ Important! ▲</b> You must enter your social security number(s) above.
City, Town or Post Office. If You Have a Foreign Address, See Instructions. <b>Skokie</b>	State ZIP Code <b>IL 60076</b>	

**Presidential Election Campaign**  
(See instructions.)

Do you want \$3 to go to this fund? .....	Yes	No	Note: Checking "Yes" will not change your tax or reduce your refund.
If a joint return, does your spouse want \$3 to go to this fund? .....		X	

**Filing Status**

- 1  Single
- 2  Married filing joint return (even if only one had income)
- 3  Married filing separate return. Enter spouse's SSN above & full name here ...
- 4  Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here ...
- 5  Qualifying widow(er) with dependent child (year spouse died ▶ 19 ). (See instructions.)

Check only one box.

**Exemptions**

6a <input checked="" type="checkbox"/> Yourself, if your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a.	No. of boxes checked on 6a and 6b	1
b <input type="checkbox"/> Spouse	No. of your children on 6c who:	
c Dependents:		
(1) First name	Last name	(2) Dependent's social security number
		(3) Dependent's relationship to you
		(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see instructions)
		• lived with you
		• did not live with you due to divorce or separation (see instructions)
		Dependents on 6c not entered above
		Add numbers entered on lines above
d Total number of exemptions claimed		1

If more than six dependents, see instructions.

FILE COPY

**Income**

7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	
8a Taxable interest. Attach Schedule B if required	8a	
b Tax-exempt interest. Do not include on line 8a	b	
9 Ordinary dividends. Attach Schedule B if required	9	
10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions)	10	
11 Alimony received	11	
12 Business income or (loss). Attach Schedule C or C-EZ	12	1,073.
13 Capital gain or (loss). Attach Schedule D	13	
14 Other gains or (losses). Attach Form 4797	14	
15a Total IRA distributions	15a	
b Taxable amount (see instrs)	15b	
16a Total pensions & annuities	16a	
b Taxable amount (see instrs)	16b	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
18 Farm income or (loss). Attach Schedule F	18	
19 Unemployment compensation	19	
20a Social security benefits	20a	
b Taxable amount (see instrs)	20b	
21 Other income. List type & amount - see instrs cancellation of debt	21	3,251.
22 Add the amounts in the far right column for lines 7 through 21. This is your total income	22	4,324.

Attach Copy B of your Forms W-2, W-2G, and 1099-R here.

If you did not get a W-2, see instructions.

Enclose, but do not staple, any payment. Also, please use Form 1040-V.

**Adjusted Gross Income**

23 IRA deduction (see instructions)	23	
24 Student loan interest deduction (see instructions)	24	
25 Medical savings account deduction. Attach Form 8853	25	
26 Moving expenses. Attach Form 3903	26	
27 One-half of self-employment tax. Attach Schedule SE	27	76.
28 Self-employed health insurance deduction (see instructions)	28	
29 Keogh and self-employed SEP and SIMPLE plans	29	
30 Penalty on early withdrawal of savings	30	
31a Alimony paid. b Recipient's SSN	31a	
32 Add lines 23 through 31a	32	76.
33 Subtract line 32 from line 22. This is your adjusted gross income	33	4,248.

If line 33 is under \$30,095 (under \$10,030 if a child did not live with you), see EIC in the instructions.

BAA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions.

Form 1040 (1998)

FDIA0112 11/02/98



Tax and Credits

34 Amount from line 33 (adjusted gross income) 34 4,248.

35a Check if:  You were 65/older,  Blind;  Spouse was 65/older,  Blind. Add the number of boxes checked above and enter the total here 35a 1

b If you are married filing separately and your spouse itemizes deductions or you were a dual-status alien, see instructions and check here 35b

36 Enter the larger of your itemized deductions from Schedule A, line 28, Or standard deduction shown on the left. But see instructions to find your standard deduction if you checked any box on line 35a or 35b or if someone can claim you as a dependent 36 5,300.

37 Subtract line 36 from line 34 37 -1,052.

38 If line 34 is \$93,400 or less, multiply \$2,700 by the total number of exemptions claimed on line 6d. If line 34 is over \$93,400, see the worksheet in the instructions for the amount to enter 38 2,700.

39 Taxable income. Subtract line 38 from line 37. If line 38 is more than line 37, enter -0- 39 0.

40 Tax. See instructions. Check if any tax from a  Form(s) 8814 b  Form 4972 40 0.

41 Credit for child and dependent care expenses. Attach Form 2441 41

42 Credit for the elderly or the disabled. Attach Schedule R 42

43 Child tax credit (see instructions) 43

44 Education credits. Attach Form 8863 44

45 Adoption credit. Attach Form 8839 45

46 Foreign tax credit. Attach Form 1116 if required 46

47 Other. Check if from a  Form 3800 b  Form 8396 c  Form 8301 d  Form (specify) 47

48 Add lines 41 through 47. These are your total credits 48

49 Subtract line 48 from line 40. If line 48 is more than line 40, enter -0- 49 0.

Other Taxes

50 Self-employment tax. Attach Schedule SE 50 152.

51 Alternative minimum tax. Attach Form 6251 51

52 Social security and Medicare tax on unreported to employer. Attach Form 4137 52

53 Tax on IRAs, other retirement plans, and MSAs. Attach Form 5329 if required 53

54 Advance earned income credit payments from Form(s) W-2 54

55 Household employment taxes. Attach Schedule H 55

56 Add lines 49-55. This is your total tax 56 152.

Payments

57 Federal income tax withheld from Forms W-2 and 1099 57

58 1998 estimated tax payments and amount applied from 1997 return 58

59a Earned income credit. Attach Schedule EIC if you have a qualifying child. b Nontaxable earned income: amount and type 59a No

60 Additional child tax credit. Attach Form 8812 60

61 Amount paid with Form 4868 (request for extension) 61

62 Excess social security and RRTA tax withheld (see instrs) 62

63 Other payments. Check if from a  Form 2439 b  Form 4136 63

64 Add lines 57, 58, 59a, and 60 through 63. These are your total payments 64

Attach Forms W-2 and W-2G to page 1. Also attach Form 1099-R if tax was withheld.

Refund

Have it directly deposited! See instructions and fill in 66b, 66c, and 66d.

65 If line 64 is more than line 56, subtract line 56 from line 64. This is the amount you Overpaid 65

66a Amount of line 65 you want Refunded to You 66a

b Routing number c Type:  Checking  Savings

d Account number

67 Amount of line 65 you want Applied to Your 1999 Estimated Tax 67

Amount You Owe

68 If line 56 is more than line 64, subtract line 64 from line 56. This is the Amount You Owe. For details on how to pay, see instructions 68 152.

69 Estimated tax penalty. Also include on line 68 69

Sign Here

Joint return? See instructions. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your Signature: *Alfred Strauss* Date: 11/17/00 Your Occupation: public relation Daytime Telephone Number (optional)

Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Spouse's Occupation

Paid Preparer's Use Only

Preparer's Signature: *Wallace E. Dunn* Date: 11/17/00 Check if self-employed  Preparer's Social Security No. 323-38-1924

Firm's Name (or yours if self-employed) and Address: Wallace E. Dunn, 561 W. Diversey, Chicago, IL ZIP Code 60614 EIN 36-2784243

For the year Jan 1-Dec 31, 1999, or other tax year beginning 1999, ending OMB No. 1545-0074

Label (See instructions.)

Your First Name MI Last Name Alfred Strauss Your Social Security Number 353-14-0416

Use the IRS label. Otherwise, please print or type.

If a Joint Return, Spouse's First Name MI Last Name Spouse's Social Security Number

Presidential Election Campaign (See instructions.)

Home Address (number and street). If You Have a P.O. Box, See Instructions. Apartment No. 8240 Crawford Skokie IL 60076

Important! You must enter your social security number(s) above.

Do you want \$3 to go to this fund? If a joint return, does your spouse want \$3 to go to this fund?

Filing Status

- 1 [X] Single
2 [ ] Married filing joint return (even if only one had income)
3 [ ] Married filing separate return. Enter spouse's SSN above & full name here
4 [ ] Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here
5 [ ] Qualifying widow(er) with dependent child (year spouse died > 19).

Check only one box.

Exemptions

6a [X] Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a
b [ ] Spouse
c Dependents: (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) [X] if qualifying child for child tax credit
d Total number of exemptions claimed 1

If more than six dependents, see instructions.

Income

Attach Copy B of your Forms W-2 and W-2G here. Also attach Form(s) 1099-R if tax was withheld. If you did not get a W-2, see instructions.

7 Wages, salaries, tips, etc. Attach Form(s) W-2 7
8a Taxable interest. Attach Schedule B if required 8a
8b Tax-exempt interest. Do not include on line 8a 8b
9 Ordinary dividends. Attach Schedule B if required 9
10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions) 10
11 Alimony received 11
12 Business income or (loss). Attach Schedule C or C-EZ 12 1,110.
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here 13
14 Other gains or (losses). Attach Form 4797 14
15a Total IRA distributions 15a b Taxable amount (see instrs) 15b
16a Total pensions & annuities 16a b Taxable amount (see instrs) 16b
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17
18 Farm income or (loss). Attach Schedule F 18
19 Unemployment compensation 19
20a Social security benefits 20a b Taxable amount (see instrs) 20b
21 Other income. List type & amount (see instrs) 21
22 Add the amounts in the far right column for lines 7 through 21. This is your total income 22 1,110.

Enclose, but do not staple, any payment. Also, please use Form 1040-V.

Adjusted Gross Income

23 IRA deduction (see instructions) 23
24 Student loan interest deduction (see instructions) 24
25 Medical savings account deduction. Attach Form 8853 25
26 Moving expenses. Attach Form 3903 26
27 One-half of self-employment tax. Attach Schedule SE 27 79.
28 Self-employed health insurance deduction (see instructions) 28
29 Keogh and self-employed SEP and SIMPLE plans 29
30 Penalty on early withdrawal of savings 30
31a Alimony paid b Recipient's SSN 31a
32 Add lines 23 through 31a 32 79.
33 Subtract line 32 from line 22. This is your adjusted gross income 33 1,031.

Tax and Credits

34 Amount from line 33 (adjusted gross income) 34 1,031.

35a Check if:  You were 65/older,  Blind;  Spouse was 65/older,  Blind. Add the number of boxes checked above and enter the total here 35a 1

b If you are married filing separately and your spouse itemizes deductions or you were a dual-status alien, see instructions and check here 35b

36 Enter your itemized deductions from Schedule A, line 28, Or standard deduction shown on the left. But see instructions to find your standard deduction if you checked any box on line 35a or 35b or if someone can claim you as a dependent 36 5,350.

37 Subtract line 36 from line 34 37 -4,319.

38 If line 34 is \$94,975 or less, multiply \$2,750 by the total number of exemptions claimed on line 6d. If line 34 is over \$94,975, see the worksheet in the instructions for the amount to enter 38 2,750.

39 Taxable income. Subtract line 38 from line 37. If line 38 is more than line 37, enter -0- 39 0.

40 Tax (see instrs). Check if any tax is from a  Form(s) 8814 b  Form 4972 40 0.

41 Credit for child and dependent care expenses. Attach Form 2441 41

42 Credit for the elderly or the disabled. Attach Schedule R 42

43 Child tax credit (see instructions) 43

44 Education credits. Attach Form 8863 44

45 Adoption credit. Attach Form 8839 45

46 Foreign tax credit. Attach Form 1116 if required 46

47 Other. Check if from a  Form 3800 b  Form 8396 c  Form 8301 d  Form (specify) 47

48 Add lines 41 through 47. These are your total credits 48

49 Subtract line 48 from line 40. If line 48 is more than line 40, enter -0- 49 0.

Other Taxes

50 Self-employment tax. Attach Schedule SE 50 157.

51 Alternative minimum tax. Attach Form 6251 51

52 Social security and Medicare tax on tip income not reported to employer. Attach Form 4137 52

53 Tax on IRAs, other retirement plans, and MSAs. Attach Form 5329 if required 53

54 Advance earned income credit payments from Form(s) W-2 54

55 Household employment taxes. Attach schedule H 55

56 Add lines 49-55. This is your total tax 56 157.

Payments

57 Federal income tax withheld from Forms W-2 and 1099 57

58 1999 estimated tax payments and amount applied from 1998 return 58

59a Earned income credit. Attach Schedule EIC if you have a qualifying child. b Nontaxable earned income: amount and type 59a No

60 Additional child tax credit. Attach Form 8812 60

61 Amount paid with request for extension to file (see instructions) 61

62 Excess social security and RRTA tax withheld (see instrs) 62

63 Other payments. Check if from a  Form 2439 b  Form 4136 63

64 Add lines 57, 58, 59a, and 60 through 63. These are your total payments 64

Refund

Have it directly deposited! See instructions and fill in 66b, 66c, and 66d.

65 If line 64 is more than line 56, subtract line 56 from line 64. This is the amount you Overpaid 65

66a Amount of line 65 you want Refunded to You 66a

b Routing number c Type:  Checking  Savings

d Account number

67 Amount of line 65 you want Applied to Your 2000 Estimated Tax 67

Amount You Owe

68 If line 56 is more than line 64, subtract line 64 from line 56. This is the Amount You Owe. For details on how to pay, see instructions 68 157.

69 Estimated tax penalty. Also include on line 68 69

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions.  X

Keep a copy for your records.

Your Signature: [Signature] Date: [ ] Your Occupation: public relation Daytime Telephone Number (optional): [ ]

Spouse's Signature. If a Joint Return, Both Must Sign. Date: [ ] Spouse's Occupation: [ ]

Paid Preparer's Use Only

Preparer's Signature: [Signature] Date: 10/23/2000 Check if self-employed  Preparer's SSN or PTIN: 323-38-1924

Firm's Name (or yours if self-employed) and Address: Wallace E. Dunn, 561 W. Diversey, Chicago, IL ZIP Code 60614

EIN: 36-2784243



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VILLAGE OF SKOKIE

## HOUSING IMPROVEMENT PROGRAM

### INCOME DISCLOSURE STATEMENT

0010573637

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Applicant's Name Alfred Strauss Date 6/5/2001

Address 8240 Crawford Skokie, Illinois 60076

Telephone: Home 847-679-2023 Work 847-933-0139 (unlisted)

1. Applicant's Total Household Income for the last tax year?

\$ 13,805

2. Applicant's Total ADJUSTED GROSS Income as listed on your last reported Income Tax Form 1040/1040A \$ 4324

3. If total household income is greater than the income listed on the applicant's Form 1040/1040A, list each household member eighteen (18) years old or older who contributes to the household income:

<u>NAME</u>	<u>ANNUAL INCOME</u>
<u>Alfred Strauss.</u>	<u>\$4324.</u>
_____	_____
_____	_____
_____	_____

Total income contributed by other household members? \$ None

Please provide the following information for each household member over 18 years of age who receives any income from any source.

(a) Employment None

Name of person employed Alfred Strauss

Name of Company where you are employed Self

Address of Company 8240 Crawford

City & State Skokie, IL 60076

Telephone 847-679-2023 Zip Code 60076

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(b) Public Assistance (ADC, General Assistance, etc.)

Recipient's Name None

Public Aid Case \_\_\_\_\_ Caseworker's Name \_\_\_\_\_

Address of Office \_\_\_\_\_ Telephone \_\_\_\_\_

(c) Social Security (Survivor's Benefits, SST, Retirement, Disability, and etc.)

Name of person receiving benefits Alfred Strauss

Office Address 8240 Crawford Soc. Sec. # 353-14-0146

City and State Skokie, IL Zip Code 60076

(d) Pension

Name of person receiving pension None

Name of Company where pension is received from \_\_\_\_\_

Address of Company \_\_\_\_\_

City & State \_\_\_\_\_ Zip Code \_\_\_\_\_

(e) Any other income not covered above

Source American Cancer Soc. Address Mutual of America

City & State 320 Park Avenue Zip Code New York, NY 10022-6839

Telephone \_\_\_\_\_

(f) Bank Accounts

<u>Name of Bank</u>	<u>Acct. #</u>	<u>Present Balance</u>	<u>Rate of Interest Paid Per Year</u>
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1. <u>Cole Taylor Bank</u>	<u>29-911-6</u>	<u>\$115.</u>	<u>None</u>
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2. <u>La Salle National Bank</u>	<u>100-411-8</u>	<u>\$125.</u>	<u>None</u>
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3. _____	_____	_____	_____
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4. _____	_____	_____	_____
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(g) Stocks, Bonds or Securities

<u>Name of Securities</u>	<u>Present Value</u>	<u>Dividends or Interest Paid Per Year</u>
1. None		
2.		
3.		
4.		

Do you or any member of your household own any interest in any real estate other than your home?

Yes \_\_\_\_\_ No xxx Percent Value of Interest? \_\_\_\_\_

I hereby certify under oath that the above information is true, complete, and correct, and I authorize the Village of Skokie to check all of the above listed Financial Data and Reference.

*Alfred Strauss*

Applicant's Signature  
Alfred Strauss

Date June 4, 2001

Subscribed and sworn to before me

this 4 day of June, 2001  
(Month) (Year)

*Elinore Mayster*  
Notary Public

