City of	

2024 POVERTY EXEMPTION POLICY & GUIDELINES

The following *policy* and *guidelines*, adopted by the City Commission or Council, shall be followed by the City Board of Review when considering *poverty exemptions* according to section 211.7u of the Michigan Compiled Laws (MCL).

Application Guidelines: To be eligible for a Poverty Exemption; The applicant must:

- 1. File Form 5737 Application for MCL 211.7u Poverty Exemption
- 2. File Form 5739 Affirmation of Ownership and Occupancy to Remain Exempt by Reason of Poverty
- 3. Own and occupy the property as a principal residence. Provide federal and state income tax returns for the current or immediately preceding year, including any property tax credits, for all persons residing in the principal residence. (Disclosure of the income of an owner who is not residing in the principal residence is not required.) Federal and state income tax returns are not required for a person residing in the principal residence if that person was not required to file a federal or state income tax return. Instead, Form 4988, *Poverty Exemption Affidavit* may be filed for all persons residing in the residence who were not required to file federal or state income tax returns in the current or immediately preceding year
- 4. Produce a valid drivers license or other form of identification, if requested
- 5. Produce a deed, land contract or other evidence of ownership of the property, if requested.
- 6. Meet the income guidelines of this policy
- 7. Meet the asset level test of this policy

Income Test

Total Annual Household Income shall not exceed the following amount applicable to the number of persons living in the household:

Number of Persons	Federal Poverty Income	City/Township Income
	Level for 2024	Level for 2024 (+20%)
1	\$14,580	\$17,496
2	\$19,720	\$23,664
3	\$24,860	\$29,832
4 .	\$30,000	\$36,000
5	\$35,140	\$42,168
6	\$40,280	\$48,336
7	\$45,420	\$54,504
8	\$50,560	\$60,672
For each additional person	\$5,140	\$6,168

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 Total Annual Household Income shall be based on Federal Poverty Income Guidelines and will be adjusted annually to agree to the federally established amount.

Potential income and asset sources are (non-inclusive):

Income from all sources

Salaries & wages before deductions

Net receipts from self-employment

Veteran payments

Royalties

Unemployment compensation

Workers' compensation

Alimony

General assistance

Social Security

Cash

Checking & savings accounts

Money market accounts

Assets in trust accounts

Interest and dividends

Pensions

Supplemental Security Income

Net rental income

Scholarships & grants

Insurance

Retirement accounts

Child support

IRA/Keogh annuities

New or reverse mortgages

Stocks & bonds

Investments

Gifts

Deferred compensation

Asset Test

- 1. Things of value that a person can own and are exempt from consideration in determining eligibility for a poverty exemption.
 - a. Applicant's principal residence
 - b. One motor vehicle per working adult
 - c. Essential household goods
 - d. Personal assets of any nature with a total value up to \$15,000.
- 2. Things of value that the Board of Review can consider in determining what percent exemption to grant:
 - a. Real estate other than the principal residence
 - b. Personal property
 - c. Motor vehicles in excess of one per working adult
 - d. Recreational vehicles and equipment
 - e. Certificate of deposits, savings accounts, checking accounts, stocks, bonds, life insurance, and retirement funds, etc.
- 3. The Board of Review shall consider the value of the assets, or indebtedness otherwise owned by the applicant. Assets (except those exempt from consideration as listed above), shall not exceed \$15,000.

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Evaluation Procedures

- 1. The Board of Review shall follow the above policy and guidelines when making poverty exemption decisions.
- 2. The applicant should be prepared to answer questions regarding their financial affairs, health, status of people living in the household, and any other question relevant to the exemption request.
- 3. All information is subject to verification.

Granting full or partial poverty exemptions. MCL 211.7u(5) states that if a person claiming poverty exemption meets all eligibility requirements, the Board of Review shall grant the poverty exemption in whole or in part as follows:

- a) A full exemption equal to a 100% reduction in taxable value for the year in which the exemption is granted: or
- b) A partial exemption equal to a 75% reduction in taxable value for the year in which the exemption is granted: or
- c) A partial exemption equal to a 50% reduction in taxable value for the year in which the exemption is granted: or
- d) A partial exemption equal to a 25% reduction in taxable value for the year in which the exemption is granted.

No other method of calculating taxable value may be utilized, except for those percentage reductions specifically authorized by statute.

Application for MCL 211.7u Poverty Exemption

This form is issued under the authority of the General Property Tax Act, Public Act 206 of 1893, MCL 211.7u.

MCL 211.7u of the General Property Tax Act, Public Act 206 of 1893, provides a property tax exemption for the principal residence of persons who, by reason of poverty, are unable to contribute toward the public charges. This application is to be used to apply for the exemption and must be filed with the Board of Review where the property is located. This application may be submitted to the city or township the property is located in each year on or after January 1.

To be considered complete, this application must: 1) be completed in its entirety, 2) include information regarding all members residing within the household, and 3) include all required documentation as listed within the application. Please write legibly and attach additional pages as necessary.

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PART 1: PERSONAL INFORMATION — Petitioner must list all required personal information.								
Petilioner's Name					Daytima Phone	Number		
Age	of Petitioner	Marital Status		Age of Spouse	Num	umber of Legal Dependents		
						1 61 1	THIS A.	
Prep	erty Address of Principal Residence	e		City		State	ZIP Code	
				Amount of Homestead Prop				
	Check if applied for H	omestead Pi	operty Tax Credit	Amount of Homestead Propi	eny tax credit			
PAF	RT 2: REAL ESTATE IN	FORMATIO	N					
, . ,				idanaa Da nyanayad	to provide a c	lood lar	d contract or other	
	the real estate informate dence of ownership of th				to provide a c	ieeu, iai	id contract or other	
Prope	erly Parcel Code Number			Name of Mortgage Company				
Unpa	id Balance Owed on Principal Res	idence	Monthly Payment		Length of Time at this Residence			
•								
Prope	rty Description							
DAG	T 3: ADDITIONAL PRO	PERTY INF	ORMATION			73 W.		
					<u>Personal and Control of the Control</u>	1 1 1 1 1 1 1 1		
List	information related to a	ny other pro	perty owned by yo	u or any member resid	ding in the ho	usehold.		
	01 1 1/		la a u u u a a a ul v d d a la a	Alcad canapiata the	Amount of Incom	e Earned fr	om other Property	
	Check if you own, or a information below.	re buying, oi	ner property. It che	ecked, complete the	1			
				1	L	Laut	1700	
	Property Address			City		State	ZIP Code	
1							A	
	Name of Owner(s)			Assessed Value	Date of Last Taxe	is Paio	Amount of Taxes Paid	
				015	<u></u>	State	ZIP Code	
	Property Address			City		State	ZIF COUP	
2					I note of look move	Dold.	Amount of Toyon Dold	
-	Name of Owner(s)			Assessed Value	Date of Last Taxe	s raio	Amount of Taxes Paid	
					1			

PART 4: EMPLOYMENT	INFORMATI	ON — List your c	urrent employ	ment inforn	nation.			
Name of Employer								
Address of Employer				City			ZIP Code	
Contact Person				ephone Number			Annual Control of Cont	
PART 5: INCOME SOUR	CES	To the same of the same	100 100 100 100 100 100 100 100 100 100					
List all income sources, ir accounts), unemploymen judgments from lawsuits, income, for all persons re	t compensati alimony, chi	ion, disability, gove Id support, friend	ernment pens	ions, worke	r's compensa	ition, divi	dends, claims and	
	Source	of Income			Month	ly or An (indicate	nual Income which)	
PART 6: CHECKING, SA	VINGS AND	INVESTMENT IN	FORMATION					
List any and all savings accounts, postal savings, persons residing at the pr	credit union	Il household men shares, certificate	nbers, includi es of deposit,	ng but not cash, stock	limited to: ch	necking a similar ir	accounts, savings ovestments, for all	
Name of Financial Ins or Investments	Amount on Deposit	Current Interest Rate	***		nt	Value of Investment		
PART 7: LIFE INSURANCE	E — List all	policies held by a	ll household r	nembers.				
Name of Insured	Amount o	of Monthly Payments	Policy Pa Full				Relationship to Insured	
PART 8: MOTOR VEHICL	E INFORMA	TION =						
All motor vehicles (including within the household must		cles, motor homes	s, camper tra	ilers, etc.) i	neld or owne	d by any	/ person residing	
Make		Year		Monthly F	Monthly Payment		Balance Owed	

PART 9: HOUSEHOLD OC	CUPANTS	— List all pe	ersons I	ving	in the househ	old.			
First and Last Name			Relationship Age to Applicant						\$ Contribution to Family Income
			190						
						ļ			
PART 10: PERSONAL DEB	T list al	l norconal d	oht for i	all hou	ischold mem	hore			4244.84.65 (3.4.4.4.4.
PART IU: PERSONAL DEB	ı — List ai	i personanu	Da				1.24 10. 1	. r r vyrjar eren i	
Creditor	Purpose	of Debt	of De		Original Ba	lance	Vlont	thly Payment	Balance Owed
						1			
							-		
PART 11: MONTHLY EXPE	ISE INFOR	MATION	1,54747	en de					
The amount of monthly exp necessary.									
Healing	Electric	Water					Phone		
Cable	Food	4.41.41.41.41.41.41.41.41.41.41.41.41.41		Clothing			Health Insurance		
Odbic									
Garbage		Daycare				Car Expense (gas, repair, etc		sə (gas, гераіг, etc.)	
Olher (type and amount)		Other (type and	i amount)			Other (type and amount)			
Olher (type and amount)		Other (type and amount)			Other (type and amount)				

NOTICE: Per MCL 211.7u(2)(b), federal and state income tax returns for all persons residing in the principal residence, including any property tax credit returns, filed in the immediately preceding year or in the current year must be submitted with this application. Federal and state income tax returns are not required for a person residing in the principal residence if that person was not required to file a federal or state income tax return in the tax year in which the exemption under this section is claimed or in the immediately preceding tax year.

PART 11: POLICY AND GUIDELINES ACKNO	WLEDGMENT	ra filtaria de la composición de la co				
The governing body of the local assessing unit shall determine and make available to the public the policy and guidelines used for the granting of exemptions under MCL 211.7u. In order to be eligible for the exemption, the applicant must meet the federal poverty guidelines published in the prior calendar year in the Federal Register by the United States Department of Health and Human Services under its authority to revise the poverty line under 42 USC 9902, or alternative guidelines adopted by the governing body of the local assessing unit so long as the alternative guidelines do not provide income eligibility requirements less than the federal guidelines. The policy and guidelines must include, but are not limited to, the specific income and asset levels of the claimant and total household income and assets. The combined assets of all persons must not exceed the limits set forth in the guidelines adopted by the local assessing unit.						
The applicant has reviewed the applicable policy and guidelines adopted by the city or township, including the specific income and asset levels of the claimant and total household income and assets.						
PART 12: CERTIFICATION						
I hereby certify to the best of my knowledge that the information provided in this form is complete, accurate and I am eligible for the exemption from property taxes pursuant to Michigan Compiled Law, Section 211.7u.						
Printed Name	Signature	Date				

This application shall be filed after January 1, but before the day prior to the last day of the local unit's December Board of Review.

Decision of the March Board of Review may be appealed by petition to the Michigan Tax Tribunal by July 31 of the current year. A July or December Board of Review decision may be appealed to the Michigan Tax Tribunal by petition within 35 days of decision. A copy of the Board of Review decision must be included with the petition.

Michigan Tax Tribunal PO Box 30232 Lansing MI 48909

Phone: 517-335-9760

E-mail: taxtrib@michigan.gov

Affirmation of Ownership and Occupancy to Remain Exempt by Reason of Poverty

This form is issued under the authority of Public Act 253 of 2020.

This form is to be used to affirm ownership, occupancy, and income status. MCL 211.7u(2) provides that, to be eligible for exemption under this section, a person shall, subject to subsection (6) and (8), annually affirm that the applicant owns and occupies, as a principal residence, the property for which an exemption is requested.

PART 1: OWNER INFORMATION — Enter informa	tion for the person owning	g and occupying	the resi	dence.	
Owner Name		Owner Telephone Number			
Mailing Address	City		State	ZIP Code	
PART 2: LEGAL DESIGNEE INFORMATION (Com	nplete if applicable.)				
Legal Designee Name		Daytime Telepho	ne Number		
Mailing Address	City		State	ZIP Code	
PART 3: HOMESTEAD PROPERTY INFORMATIO	N — Enter information for p	roperty in which th	ie exemp	tion is being claimed.	
City or Township (check the appropriate box and enter name)	HANNA - eternia - encesering social agricultural control to	County	2571 3 . 1 . 4		
City Township Village					
Name of Local School District					
Parcel Identification Number	Year(s) Exemption Previous	ously Granted by Board	of Review		
Homestead Property Address	City		State	ZIP Code	
PART 4: AFFIRMATION OF OWNERSHIP, OCCUP	ANCY, AND INCOME ST	'ATUS (Check al	l boxes	⊥ that apply.)	
I own the property in which the exemption is being of as any dwelling with its land and buildings whe After establishing initial eligibility for the exemption as a fixed income solely from public assistance of inflation, such as federal Supplemental.	claimed is used as my hor ere a family makes its hom otion, my income and asse stance that is not subject t	ne. et status has rem o significant ann	nained u ual incre	nchanged and/or eases beyond the	
PART 5: CERTIFICATION					
I hereby certify to the best of my knowledge that the an exemption from property taxes by reason of pove					
Owner or Legal Designee Name (print) Signa	ature of Owner or Legal Designee		Di	ate	
Designee must attach a letter of authority.				**************************************	
LOCAL GOVERNMENT USE	ONLY (DO NOT WRITE	BELOW THIS L	NE)		
Approved Denied (Attach appeal instruction	ns and provide to owner.)	Tax Year(s) exe	mption wil	l be posted to tax roll	
CERTIFICATION — I certify that, to the best of my accurate.	knowledge, the informati	ion contained in	this forn	n is complete and	
Assessor Signature		Date Certified by A	Assessor		

Poverty Exemption Affidavit

This form is issued under authority of Public Act 206 of 1893; MCL 211.7u.

Signature of Person Making Affidavit

Date