

2018 OREGON TOWNSHIP HARDSHIP APPLICATION
2525 Marathon Road, Lapeer, Michigan 48446

*** MUST BE COMPLETED IN ITS ENTIRETY TO BE CONSIDERED ***

Date _____

I, _____, being the owner and resident of the property listed below, apply for tax relief under MCL 211.7u of the General Property Tax Act. The real and personal property of person who, in the judgement of the supervisor and board of review, by reason of poverty are unable to contribute toward the public charges is eligible for exemption in whole or in part from taxation under this act.

Parcel Number: _____

Property Description:

Address: _____

Primary Phone Number: _____ Marital Status: _____

Age of applicant: _____ Age of spouse: _____

Number of dependents: _____ Age of dependents: _____

How long have you lived at this address _____

Do you own and occupy the property for which the reduction is requested?

Own: Yes No

Occupy: Yes No

Have you applied for Homestead Property Tax Credit? _____

****Attach copy of Federal or state income tax return for each person residing in the homestead, if filed for the current or preceding year****

Does the applicant or any other owner or occupant have an ownership interest in any real estate other than the above property?

Yes No

Does the applicant or any other owner or occupant use this property for business purposes?

Yes No

If yes, list all other real estate and/or businesses:

When was the property purchased?

What was the purchase price?

\$ _____

Is there a current mortgage or a land contract on the property? () Yes () No

If so, what is the monthly mortgage or land contract payment? \$ _____

() With Taxes () Without Taxes

What year did the current mortgage or land contract begin? _____

When will the mortgage or land contract be paid off? _____

What is the unpaid balance on the mortgage or land contract? \$ _____

Are the taxes current? () Yes () No

Did you seek property tax relief for any years prior to this year? () Yes () No

If yes, list years: _____

Employment Status: () Employed Employer: _____

Occupation: _____

() Retired () Unemployed () Disabled-How Long: _____

Describe any disability or health problems of applicant:

Spouse's Name: _____ Age: _____

Employment Status: () Employed Employer: _____

Occupation: _____

() Retired () Unemployed () Disabled-How Long: _____

Describe any disability or health problems of applicant:

Additional Owners and Occupants: (Attach additional sheet if necessary)

-List all persons living in household

Name	Age	Relationship to Claimant	Place of Employment	Contribution to Family Income

Applicant and all other owners and occupants: (complete a page 3 for each)

Please list all sources of personal income and indicate the amount from each source on an annual basis:

Name: _____

<u>Incomes:</u>	Applicant	Spouse/Occupant/Other
Wages	\$ _____	\$ _____
Pensions, Ira's, Annuities	\$ _____	\$ _____
Social Security	\$ _____	\$ _____
Unemployment Compensation	\$ _____	\$ _____
Workman's Compensation	\$ _____	\$ _____
Welfare Assistance – ADC	\$ _____	\$ _____
Alimony	\$ _____	\$ _____
Child Support	\$ _____	\$ _____
Interest/Dividends	\$ _____	\$ _____
Insurance(include Life)	\$ _____	\$ _____
Gifts (Cash, Other)	\$ _____	\$ _____
Reverse Mortgages	\$ _____	\$ _____
Other	\$ _____	\$ _____

Current assets: (Please provide balances as of 12/31/2017)

Cash/ Checking Account	\$ _____	\$ _____
Savings/Money Markets/CD's	\$ _____	\$ _____
Stocks/Bonds	\$ _____	\$ _____
Investments (Real & Personal)	\$ _____	\$ _____
Ira's, Annuities	\$ _____	\$ _____
Insurance	\$ _____	\$ _____
Gifts/Cash/Other	\$ _____	\$ _____

Vehicles in Household (include Campers, Boats, RV's Farm Equipment etc.)

Make	Year	Monthly Payment	Balance Owed

What is the **TOTAL** income, for all owners and occupants living in the household, for the past two (2) years:

Current Year Total \$ _____

Last Year Total \$ _____

Do you anticipate any major changes in income for the coming year? Yes No

If yes, please explain:

Applicant and all owners and occupants shall supply copies of:

Previous year's Federal and Michigan Income tax returns, including a filed Michigan Homestead Property Tax Credit Form and MI- 1040CR

****If you were not required to file a federal or state income tax return, you must sign the attached Poverty Exemption Affidavit Form 4988.**

Do you anticipate selling the property for which relief is sought? Yes No

Please explain any unusual circumstances which may surround the necessity of this Hardship Application.

I have read this document in its entirety and sign this document of my own free will.

Notice: Any willful misstatements or misrepresentations made on this form may constitute perjury, which, under law, is a felony punishable by fine or imprisonment.

Notice: Do not sign until witnessed by a notary public.

APPLICANT SIGNATURE: _____ **DATE:** _____

SPOUSE SIGNATURE: _____ **DATE:** _____

OTHER OWNERS SIGNATURES:

DATE: _____
DATE: _____
DATE: _____
DATE: _____

(Attach additional Notary pages if necessary)

The aforementioned, _____, being duly sworn, deposes and says that the statements made in the foregoing application are true.

STATE OF MICHIGAN, COUNTY OF LAPEER, TOWNSHIP OF OREGON

Subscribed and sworn this _____ day of _____, 20_____.

Signature of Notary Public

Expiration Date

**AUTHORIZATION TO VERIFY APPLICATION
AND INSPECT PROPERTY**

PLEASE READ CAREFULLY:

I am unable to pay the full property taxes on the above described property and hereby make application for property tax relief in accordance with Section 211.7u Michigan Compiled Laws. I (we) have read this application and Poverty Exemption Guidelines and fully understand the contents thereof. I (we) declare that the statements made herein are complete, true, and correct to the best of my (our) knowledge. I (we) further understand that if any information contained herein is found to be false or incomplete, or if property is sold within the year, any and all relief granted by this application will be forfeited and placed back on the assessment roll with penalties and interest occurring on the additional tax liability.

I also authorize a representative of the Oregon Township Assessing Staff to physically inspect my property at some point during the course of this year to ensure accuracy of the property appraisal record card.

APPLICANT SIGNATURE: _____ DATE: _____

SPOUSE SIGNATURE: _____ DATE: _____

OTHER OWNERS SIGNATURES:

DATE: _____
DATE: _____
DATE: _____
DATE: _____

**Board of Review
Township of Oregon
Homestead Poverty Exemption Claim**

WAIVER OF CONFIDENTIALITY

Parcel ID #: _____

Property Address: _____

I (we), _____, hereby consent of the examination of copies of my tax returns and related financial documents, including but not limited to those listed below, by the Township of Oregon Assessor and or designate agent and by the members of the Oregon Board of Review:

- Federal Income Tax Returns
- Michigan Income Tax Returns
- Senior Citizens Homestead Property Tax Form
- General Homestead Property Tax Claim Form
- Statements from Social Security Administration

Furthermore, I consent to the discussion of the information contained in my tax returns and related financial documents at a duly convened public meeting of the Township of Oregon Board of Review. By signing this Waiver of Confidentiality, I understand and acknowledge that I am forever giving up any and all possible claims I may have relative to the disclosure of information contained in said tax returns and related financial documents, which claims may arise pursuant to Internal Revenue Code Section 6103, and/or any other federal, state or local statute or regulation.

I have read this document in its entirety and sign this document of my own free will.

APPLICANT SIGNATURE: _____ DATE: _____

SPOUSE SIGNATURE: _____ DATE: _____

OTHER OWNERS SIGNATURES:

DATE: _____
DATE: _____
DATE: _____
DATE: _____

Poverty Exemption Affidavit

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

INSTRUCTIONS: When completed, this document must accompany a taxpayer's Application for Poverty Exemption filed with the supervisor or the board of review of the local unit where the property is located. MCL 211.7u provides for a whole or partial property tax exemption on the principal residence of an owner of the property by reason of poverty and the inability to contribute toward the public charges. MCL 211.7u(2)(b) requires proof of eligibility for the exemption be provided to the board of review by supplying copies of federal and state income tax returns for all persons residing in the principal residence, including property tax credit returns, or by filing an affidavit for all persons residing in the residence who were not required to file federal or state income tax returns for the current or preceding tax year.

I, _____, swear and affirm by my signature below that I reside in the principal residence that is the subject of this Application for Poverty Exemption and that for the current tax year and the preceding tax year, I was not required to file a federal or state income tax return.

Address of Principal Residence: _____

Signature of Person Making Affidavit

Date