Due: December 8, 2023

City of Southgate Application for Poverty Exemption For 2023

GUIDELINES AND INSTRUCTIONS FOR POVERTY EXEMPTION

- If granted an exemption, it is for the <u>current year only</u>. The Poverty exemption is intended to be a temporary form of assistance.
- Per, MCL 211.7u(3), the application for consideration must be received by the Assessor's Office at least one day prior
 to the last session of the Board of Review. <u>Board of Review dates are posted annually and may also be found at
 www.southgatemi.org or by calling (734) 258-3007</u>. This application can be made by mail, if received one day prior
 to the last session of the Board of Review.
- The application must be filled out in its entirety and all requested documentation must be attached. If an area does
 not apply to the applicant, "N/A" must be used. If the application is not complete or requested documentation is not
 included, the Board of Review will deny the exemption. All pages included with this application must be returned
 when the application is submitted for review.
- Per MCL 211.7u(7), a person who files a claim for Poverty exemption IS NOT prohibited from also appealing the assessment on the property to the Board of Review in the same year.

Required Documentation to be Attached to Poverty Exemption Application

- Per MCL 211.7u(2)(b), federal and state income tax returns for all persons residing in the principal residence must be
 included with the application including any property tax credit returns. The tax returns may be from the current or
 preceding tax year. If any person in the household is not required to file federal or state tax returns, the included
 affidavit, form 4988, must be completed by each person that does not file taxes.
- The most recent statement for all bank accounts, investments, IRAs, CDs, 401Ks, money market, annuities, etc. The statement submitted must be complete with no missing pages and submitted for all persons residing in the home.
- Proof of income/assets from the Social Security Administration, Veterans Administration, Medicare, Medicaid, Bridge Card, and any College/University scholarships for all persons residing in the home.
- The most recent mortgage statement of the primary residence under review, including any reverse mortgages.
- If primary residence being sought for exemption was purchased within the past two years of this application, homeowner's closing statements must be submitted with application.

Common Reasons for Denial of Poverty Exemption Application

Below are common reasons (but not an exhaustive list) of why a claim for Poverty Exemption is denied:

- Failure to fill out all areas of the application, including "N/A" in areas not applicable to the applicant or signing the
 application.
- Failure to include State and Federal Income taxes or property tax credit returns for current or one preceding year for
 all persons residing in the home. Please note that the property tax credit returns are required to be filed with this
 application. Property tax credit returns (such as Michigan 1040CR) can still be filed with the State of Michigan even
 if the applicant does not file income taxes.
- Failure to include complete banking/investment account and mortgage statements for all persons residing in the home. All pages must be submitted.

INCOME GUIDELINES FOR POVERTY EXEMPTION

This amount published annually by the US Dept. of Health and Human Services

*Per Michigan State Tax Commission Bulletin number 19 of 2022, "Procedural changes for 2023, November 15, 2023

Number in Family	Income
1 Member	\$13,590
2 Members	\$18,310
3 Members	\$23,030
4 Members	\$27,750
5 Members	\$32,470
6 Members	\$37,190
7 Members	\$41,910
8 members	\$46,630
For each additional add:	\$4,720

According to the US Census Bureau, "income" includes:

- Money, wages, and salaries before any deductions
- Net receipts from non-farm self-employment. (These are receipts from a person's own business, professional enterprise, or partnership, after deductions for business expenses.)
- Net receipts from farm self-employment. (The same provisions as above for self-employment.)
- Regular payments from social security, railroad retirement, unemployment, worker's compensation, veteran's payments and public assistance.
- Alimony, child support, and military family allotments.
- Private pensions, governmental pensions, and regular insurance or annuity payments.
- College or university scholarships, grants, fellowships, and assistantships.
- Dividends, interest, net rental income, net royalties, periodic receipts from estates or trusts, and net gambling or lottery winnings.

ASSET LEVEL GUIDELINES FOR POVERTY EXEMPTION

The Asset Level does not include the primary residence for which exemption is being sought. It does include, but is not limited to:

- A second home, additional land not associated with the primary residence, or other buildings other than the primary residence being sought for exemption.
- Vehicles and other recreational vehicles such as motor homes, campers, ATVs, boats, and motorcycles.
- Jewelry, antiques, artwork, equipment, and other personal property of value.
- Bank accounts, stocks, bonds, and investments. This also includes the money received from the sale of stocks, bonds, investments, cars, and houses unless a person is in the specific business of selling such property.
- Withdrawals of bank accounts and borrowed money.
- Gifts, loans, lump-sum inheritances, and one-time insurance payments.
- Food or housing received in lieu of wages and the value of food and fuel produced and consumed on farms.
- Federal non-cash benefits programs such as Medicare, Medicaid, food stamps, and school lunches.
- The total interest income in all accounts (checking, savings, CDs, IRAs, 401Ks, money market, annuities, etc.)
- The applicant shall not have ownership interest in any real estate other than the primary residence being considered for exemption.

Maximum total allowed assets, including amounts in banking/investment accounts <u>may not exceed the amount of the federal poverty guideline for the number of persons in the household</u>. See above for what is considered an asset.

Poverty Exemption Worksheet Copy Provided to Applicant After Board of Review Meeting

Parcel Number:	Year	:	
Property Address: Applica	ant's Name:		
For Board of Review Use Only -	Do Not Write B	elow Ti	his Line
Staff - Initial next to all requirements as it relates to the application/application	ant.		
Does the applicant appear as taxpayer of record of property in question?		Yes	No
If not, has documentation proving ownership been provided?			No
Are all areas on the application complete with either an answer or "N/A"?		Yes	No
Are all pages of the guidelines/application included with the applicants so	ubmission?	Yes	No
Does the applicant reside at the property in question?		Yes	No
Are copies of the Federal and State income tax returns and property tax crecurrent of preceding year attached for all persons residing in the household			No
If not, is the affidavit stating the person is not required to file income ta	xes completed?	Yes	No
If home was purchased within in past 2 years of date of this application, i statements provided?		Yes	No
Is a copy of the most current mortgage statement, including a reverse mor attached?	tgage if applicable,	Yes	No
Are copies of the most recent bank/investment statements for all residing attached with all pages included?	in the household	•	No
a. Taxable value on roll	\$		
b. Number of people in household			
c. Total household income from information provided	\$		
Income limit based on number of people in household			
d. as established by guidelines	\$		
e. Total assets of household	\$		
Does applicant meet all asset and income guidelines f. as established?	☐ _{YES} ☐	□ _{NO}	If no, reason must be provided by the Board of Review below.
g. If yes, multiply line "a" by 50% (0.50)	\$		
Appeal Denied			Reduction Granted
1. Does not qualify based on guidelines 2. Application not complete, missing information 3. Did not furnish proper documentation 4. Other:			Taxable Value As on Roll \$ Revised \$
Initials of Board Members:		Da	ate:

Poverty Exemption Affidavit This form is issued under authority of Public Apr 208 of 1893 IMCL 211 7u

with the supervisor or the board of review of the loc whole or partial property tax exemption on the princ the inability to contribute toward the public charges provided to the board of review by supplying copies	must accompany a taxpayer's Application for Poverty Exemption filed all unit where the property is located MCL 2117u provides for a sipal residence of an owner of the property by reason of poverty and MCL 2117u(2)(b) requires proof of eligibility for the exemption be sof federal and state income tax returns for all persons residing in the urns, or by filing an affidavit for all persons residing in the residence e tax returns for the current or preceding tax year
I,	, swear and affirm by my signature below that I subject of this Application for Poverty Exemption and that ax year, I was not required to file a federal or state
Address of Principal Residence:	

Date

Signature of Person Making Affidavit

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.

PAR	T 1: PERSONAL INFOR	RMATION -	— Petitioner must li	ist all required person	al information				
Petitioner's Name			Daytime Phone Number						
Age of	Petitioner	Marital Status		Age of Spouse	Num	umber of Legal Dependents			
Proper	ty Address of Principal Residence			City	•	State	ZIP Code		
	Check if applied for Hor	mestead P	roperty Tax Credit	Amount of Homestead Property Tax Credit					
PAR	T 2: REAL ESTATE INF	ORMATIO	N						
	the real estate information				to provide a d	deed, lar	nd contract or other		
Proper	ty Parcel Code Number			Name of Mortgage Company	1				
Unpaid	Balance Owed on Principal Resid	lence	Monthly Payment		Length of Time a	at this Resid	ence		
Proper	ty Description								
PAR	T 3: ADDITIONAL PRO	PERTY IN	FORMATION						
List	information related to an	y other pro	perty owned by yo	u or any member resi	ding in the ho	usehold			
	Check if you own, or are information below.	e buying, c	ther property. If che	ecked, complete the	Amount of Incon	ne Earned f	rom other Property		
	Property Address			City		State	ZIP Code		
1	Name of Owner(s)			Assessed Value	Date of Last Tax	es Paid	Amount of Taxes Paid		
	Property Address			City		State	ZIP Code		
2	Name of Owner(s)			Assessed Value	Date of Last Tax	es Paid	Amount of Taxes Paid		

PART 4: EMPLOYMENT	INFORMAT	ION — List	VOUL CULL	ent empl	ovment	inforn	nation.		
Name of Employer									
Address of Employer				City				State	ZIP Code
Address of Employer				City				State	ZIF Code
Contact Person				Employer`	Telephone I	Number			
PART 5: INCOME SOUR	CES								
List all income sources, including but not limited to: salaries, Social Security, rents, pensions, IRAs (individual retirement accounts), unemployment compensation, disability, government pensions, worker's compensation, dividends, claims and judgments from lawsuits, alimony, child support, friend or family contribution, reverse mortgage, or any other source of income, for all persons residing at the property.									
	Source	of Income	•				Monthl	y or Ana (indicate s	nual Income which)
		· -							
PART 6: CHECKING, SA	/INGS AND	INVESTM	ENT INF	ORMATIC	ON				
List any and all savings owned by all household members, including but not limited to: checking accounts, savings accounts, postal savings, credit union shares, certificates of deposit, cash, stocks, bonds, or similar investments, for all persons residing at the property.									
Name of Financial Inst		Amour on Depo		Current Iterest Ra		Nan	Value of Investmen		
				_					
PART 7: LIFE INSURANCE	<u> </u> :F :	Loolicies he	eld by all l	househol	 d memb	ers	<u> </u>	<u>. </u>	
Name of Insured	Amount Policy	of Mc	cies held by all household members. Monthly Policy Paid in Payments Full Na				ime of Benefi	Relationship to Insured	
Name of msured	Policy	гау	ments	- ru	411	·	inie or benen	ciai y	แเจนเอน
									-
PART 8: MOTOR VEHICL	E INFORM	ATION		_1	•				·
All motor vehicles (including motorcycles, motor homes, camper trailers, etc.) held or owned by any person residing within the household must be listed.									
Maka			Vos=		14	nthl:	Dayman*	D.	alance Owed
Make Year Monthly				ıuny	гаушеш	Ba	alance Owed		

PART 9: HOUSEHOLD OC	CCUPANTS -	 List all per 	ersons li	ving i	in the househ	old.					
First and Last Name		Age		Relationship to Applicant		Place of Employment			\$ Contribution to Family Income		
PART 10: PERSONAL DE	RT — List all	nersonal d	ebt for a	ıll ho	usehold mem	bers					
PART TO: PERSONAL DE	DI LISCAII	personard	Dat		discribit mon	ibers.					
Creditor	Purpose	of Debt	of De		Original Balance Monthly Pa		hly Payment	Bala	nce Owed		
PART 11: MONTHLY EXP	ENSE INFOR	RMATION		-							
The amount of monthly ex necessary.			orincipal	resid	dence for eac	ch cate	gory	must be listed	d. Indic	ate N/A as	
Heating	Electric	otric			Water			Phone			
Cable	Food	l.		Clothing			Health Insurance				
Garbage		Daycare				C	Car Expense (gas, repair, etc				
Other (type and amount)		Other (type an	pe and amount)			O	Other (type and amount)				
Other (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				
used for the granting of exemptions under MCL the federal poverty guidelines published in the prof Health and Human Services under its authoriadopted by the governing body of the local asseligibility requirements less than the federal guithe specific income and asset levels of the claim	shall determine and make available to the public the 211.7u. In order to be eligible for the exemption, to calendar year in the Federal Register by the Unity to revise the poverty line under 42 USC 9902, obsessing unit so long as the alternative guidelines idelines. The policy and guidelines must include mant and total household income and assets. The puidelines adopted by the local assessing unit	he applicant must meet nited States Department or alternative guidelines do not provide income , but are not limited to, combined assets of all			
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	- 4				
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