

City of Lathrup Village

27400 Southfield Road
Lathrup Village, MI 48076

Date: _____

Parcel Number: _____

Petition Number: _____

Poverty Exemption Application

As authorized under the provisions of
The General Property Tax Act of 1893 (as amended)

Policy for applicants requesting Consideration for poverty exemption Important – Please Read!

1. All Applicants must obtain the proper applications from the Treasurer's Office. Physically Disabled or infirmed may call the Treasurer's office to make necessary arrangements for assistance.
2. Applicants will not be eligible for consideration if they do not meet the income and asset tests as established and resolved by the Lathrup Village City Council.
3. All applicants must be the owner of and occupy as a homestead the property for which the exemption is requested. All applicants may be asked to verify ownership of the property and provide personal identification upon board request.
4. All applicants are required to fill out the attached application form in its entirety and return it to the Lathrup Village Treasurer's Office.
5. All applications will be required to be notarized.
6. All applicants must submit prior year's copy of the following:

Federal Income Tax Return – 1040 or 1040A
Senior Citizen Homestead Property Tax Form MI-1040CR-1
General Homestead Property Tax Claim MI-1040CR-4

Note: All requested Tax forms must be submitted. The board will **not** consider any application that is presented incomplete.

7. All applications shall be filed with the Treasurer's office after January 1 but before the day prior to the last day of the board of review

8. Applicants need not appear in front of the board, however the Board of Review reserves the right to request further information or clarification of any item presented on the application form or tax forms as submitted. Applicants may be asked to make a physical appearance to respond to questions at the Boards discretion.
9. The governing body of the local assessing unit shall determine and make available to the public the policy and guidelines the local assessing unit uses for granting exemptions under the General Property Tax Act of 1893 (as amended)
10. Assets: The total value of the assets of the applicant and each member of the applicant's household shall not exceed \$50,000.

Board's Discretion: the Board of Review shall have the discretion of deviating from the guidelines set forth for granting or denying a hardship exemption if the board determines there are substantial and compelling reasons why there should be a deviation from the policy and guidelines. The substantial reasons shall be communicated in writing to the applicant

Petitioner Information

Name: _____ Age: _____

Date of Birth: _____

Phone Number (Daytime): _____ Evening: _____

*** a phone number must be provided ***

of persons in household: _____ # of persons contributing to household income: _____

Property Address for which relief is being sought:

Marital Status:

- Married
 Divorced
 Widowed
 Separated
 Single

No. of years:

Petitioner Employment Status:

- Employed Full Time
 Employed Part Time
 Retired – No. of Years _____
 Unemployed – No. of Years _____
 Laid off – No. of Years _____
 Other

Spouse Employment Status:

- Employed Full Time
 Employed Part Time
 Retired – No. of Years _____
 Unemployed – No. of Years _____
 Laid off – No. of Years _____
 Other

Occupation: _____

Occupation: _____

Employer: _____

Employer: _____

Address: _____

Address: _____

Telephone: _____

Telephone: _____

Describe any unique situation you may want the board to consider:

ASSETS

Do you own your home? Yes ____ No ____

If yes, what is the balance owed? \$ _____

What is the market value of your home? \$ _____

How long have you lived in the home? _____

Do you own any other real estate? Yes ____ No ____

If yes, what is the market value? \$ _____ What is the balance owed? \$ _____

List below the year, make, model, and balance owed on all vehicles owned by members of the household (If no vehicles owned, check here ____):

Year _____ Make _____ Model _____ Balance: \$ _____

Year _____ Make _____ Model _____ Balance: \$ _____

Year _____ Make _____ Model _____ Balance: \$ _____

Year _____ Make _____ Model _____ Balance: \$ _____

Does any member of the household own any recreational vehicles (for example: boats, motor homes, snowmobiles, jet skis, campers, ATVs, etc)? Yes ____ No ____

If so, describe the type of each vehicle, and list the year, make, and balance owed below:

Description _____ Year _____ Make _____ Balance: \$ _____

Description _____ Year _____ Make _____ Balance: \$ _____

Indicate balances on items listed below (combined totals for all members of the household):

All Checking Accounts: \$ _____ All Savings Accounts: \$ _____

All Stocks: \$ _____ All Bonds: \$ _____

All Mutual Funds: \$ _____ All 401K Accounts \$ _____

Land Contracts or
Mortgages Receivable: \$ _____ All Certificates of
Deposit: \$ _____

List and describe the value of all other *significant* assets of members of the household not identified above (**attach a separate sheet if necessary**): _____

Mortgage Information

A. Purchase Date:_____ Price:_____

B. Mortgage/Land Contract Balance:_____

C. Monthly Payment:_____ Does this payment include taxes? ()yes ()no

D. Number of years remaining on the mortgage/land contract:_____

E. Are your Property Taxes paid? ()yes ()no

F. Did you apply for a poverty exemption last year? ()yes ()no

G. Do you have ownership interest in any other real estate in Michigan or elsewhere ?_____

If yes, Please list:

Location:_____

Tax Id Number:_____

Purchase Date:_____ Purchase Price:_____

(please attach separate sheet if necessary)

H. Are you and/or your spouse the sole owners of the subject property? ()yes ()no

If no, please list all owners and their percentage of ownership:

I. Have any improvements, changes or additions been made to the property in the last two (2) Years? ()yes ()no **If yes, please explain:**_____

J. Do you anticipate selling the homestead property for which relief is sought in the next year? ()yes ()no **Explain:**_____

Do you anticipate any major changes in income for the coming year? ()yes ()no

Average Monthly Expense and Income Information

Expense	Amount	Income	Amount
House Payment	\$	Wages, Salaries, etc.	\$
Life Insurance	\$	Interest, Dividend	\$
Health Insurance	\$	Net Rent, Royalty Income	\$
Home Insurance	\$	Retirement Pension Payer	\$
Taxes (Homestead Only)	\$	Net Farm Income	\$
Taxes on other Property	\$	Capital Gains (less losses)	\$
Car Payment	\$	Alimony and other income	\$
Special Assessment	\$	SSI Social Security	\$

Expense	Amount	Income	Amount
Gas/Oil	\$	Child Support	\$
Electricity	\$	Unemployment Benefits	\$
Telephone	\$	Workers Compensation	\$
Water/Sewer	\$	Disability Income	\$
Child Care	\$	ADC and GA Benefits	\$
Food/Clothing	\$	All other public assistance	\$
Other Loans	\$	Other Income	\$
Medical	\$		\$
Lawn Care	\$		

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Cable	\$		
Other	\$		
Total	\$	Total	\$

Verification of expenses and income sources may be required

Do you have any major or unusual expenses? ()yes ()no

If yes, please explain:

What was the total income from all sources of everyone living in your household for the past two (2) years?

Last Year: _____ Prior Year: _____

Please Read Carefully:

I/We, am/are unable to pay the full property taxes due to poverty on the above described property and hereby make application for property tax relief in accordance to Section 211.70 MCL. I/We have read this application 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, 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 in accordance with Section 211.19 MCL.

Petitioner Signature: _____

Spouse's Signature: _____