CITY OF OWOSSO

PROPERTY TAX POVERTY EXEMPTION POLICY & GUIDELINES

POLICY

The City of Owosso will grant partial exemptions due to poverty according to Section 211.7u of the Michigan Compiled Laws. *Property Tax Poverty exemptions must be applied for each year,* after January 1st, but one day prior to the last day of the December Board of Review.

The Assessor and the Board of Review will apply the guidelines as adopted by the City uniformly to all applicants without prejudice and shall not deviate from the adopted guidelines without substantial and compelling reasons. Any such deviation shall be communicated in writing to the applicant. (211.7u).

The Assessor's office will determine the estimated property tax liability for the applicable tax year and the estimated State homestead credit for each applicant. The exemption shall not exceed the tax liability minus the estimated homestead credit refund received during the current tax year. (Example: if the tax liability is \$1000 and the homestead credit received in the current tax year is \$300, the exemption shall not exceed \$700.)

The Board of Review may deviate from the above policy where there are substantial and compelling reasons and such substantial and compelling reasons are communicated in writing to the City Council and the claimant (211.7u).

GUIDELINES

The applicant shall:

- Be the owner and occupy the principal residence the property for which an exemption is applied (211.7u).
- File a claim (application) on the form provided by the City Assessor's office. The filing of a claim constitutes an appearance before the Board of Review for the purpose of preserving the claimant's right to appeal (211.7u). **The application form shall be fully completed.**
- Sign the application at the Assessor's office when the application is returned. If the applicant cannot personally return the application, a notarized application is acceptable.
- Supply a copy of federal and state income tax returns for <u>all</u> persons residing in the homestead, including any property tax credit returns, filed in the immediately preceding or in the current year (211.7u) and/or, affidavit, (Treasury Form 4988), <u>must</u> be filed by <u>all</u> persons residing in the residence that are not required to file a federal and/or state income tax return.

- Supply a copy of proof of income for the most recent one-month period for <u>all</u> household members (current pay stubs, benefit statement, etc.)
- Supply identification, proof of residency and ownership if requested by the Assessor or Board of Review (211.7u).

If the applicant fails to supply <u>all</u> the required documents or if it is found that the information supplied is fraudulent, the application <u>shall be denied</u>.

Income Test

Applicant's income shall not exceed the federal poverty income thresholds as defined and determined annually by the U.S. Department of Commerce or 40% of the median income for Shiawassee County as provided by the State of Michigan Housing Development Authority, whichever threshold is higher. The most recent available income guidelines will be used. (See attached defined income)

2018 Income Standards Poverty Threshold

Number of persons residing in homestead	Annual allowable income
1 person	15,800.
2 persons	18,080.
3 persons	20,420.
4 persons	24,600.
5 persons	28,780.
6 persons	32,960.
7 persons	37,140.
8 persons	41,320.
Each additional person, add	4,180.

Income of students under the age of 18 years, **shall not** be included as income

Asset Test

The value of property in **excess** of what is considered part of the original homesteads minimum zoning required footprint for that home shall be considered an asset.

According to the MTT Small Claims Division Docket 236230, 8/13/1997, the MTT views the asset test to be: **an indication of funds available which may be used to pay one's taxes....and not the inclusion of equity in one's home.**

Assets include, but are not limited to: real estate other than principal residence minimum footprint, motor vehicles, recreational vehicles and equipment, certificates of deposits, savings accounts, checking accounts, stocks, bonds, life insurance, retirement funds, etc. For purposes of this paragraph, the Board of Review shall consider the value of the assets and shall not reduce such value by any indebtedness owed on such assets, or indebtedness otherwise owed by the applicant(s).

Assets, (except the original homestead and minimum zoning required footprint, essential household goods and the first \$5,000 of the market value of a motor vehicle), shall not exceed \$4,000 (four thousand) dollars for individual applicant and/or \$6,000 (six thousand) dollars per household if more than one financial contributor.

The Bureau of the Census defines income to include the following:

- 1. Money wages and salaries before any deductions.
- 2. 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.
- 3. Net receipts from farm self-employment. These are receipts from a farm which one operates as an owner, renter, or sharecropper, after deductions for farm operating expenses.
- 4. Regular payments from social security, railroad retirement, unemployment compensation, strike benefits from union funds, workers' compensation, veterans' payments, public assistance (including Aid to Families with Dependent Children, Supplemental Security Income, Emergency Assistance money payments, and non-Federally-funded General Assistance or General Relief money payments).
- 5. Alimony, child support, and military family allotments or other regular support from an absent family member or someone not living in the household.
- 6. Private pensions, government employee pensions (including military retirement pay), and regular insurance or annuity payments.
- 7. College or university scholarships, grants, fellowships, and assistantships.
- 8. Dividends, interest, net rental income, net royalties, periodic receipts from estates or trusts, and net gambling or lottery winnings.

Income does <u>not</u> include the following:

- 1. Money received from the sale of property such as stocks, bonds, a house, or a car unless a person is in the business of selling such property.
- 2. Withdrawals of bank deposits and borrowed money.
- 3. Tax refunds, gifts, loans, lump-sum inheritances, one-time insurance payments.
- 4. Food or housing received in lieu of wages and the value of food and fuel produced and consumed on farms.
- 5. Federal non-cash benefit programs such as Medicare, Medicaid, food stamps, school lunches.

CITY OF OWOSSO

Property Tax POVERTY EXEMPTION APPLICATION

I,	, being th	e <u>owner and r</u>	resident of the prop	erty listed below, desire to
apply for Tax Relief under Sect	ion 7u of the Michiga	n General Pr	operty Tax Act: Th	e Principal Residence of
person(s) who, in the judgement	nt of the Assessor ar	nd Board of F	Review, by reason	of poverty, are unable to
contribute toward the public cha	arges, are eligible for	exemption f	rom taxation per M	ICL 211.7u(1).
In order to be considered con	nplete, this applicat	ion must: (1) Be completed in	its entirety (2) Include
information regarding ALL n				
documentation as listed with	nin the application.	Please writ	e legibly and atta	ch additional pages as
necessary.				
PROPERTY & APPLICAN	<u>IT INFORMATION</u>	<u>I</u>		
Parcel Number: 050-				
Address:			Phone No:	
Marital Status (Check One):				
,			_ Widowe	
Ass of Applicants		WIGOW	_ widowe	1
Age of Applicant:				
Is this property your homestead	d (primary residence))?		
How long have you lived at this	address?			
DO YOU OWN, OR ARE Y	YOU BUYING, AN	Y OTHER	PROPERTY? '	YES_ NO_
IF YES, LIST.	·			
Property Address	Assessed Value	Joi	nt Ownership?	
			•	
		<u> </u>		
		<u> </u>		
EMPLOYMENT INFORMA	<u>ATION</u>			
Name of Employer:				
Address of Employer:				
Contact Person	F	mplover Pho	one Number	
	L		JIIO I 10111DOI	

INCOME INFORMATION

Person(s) Insured _____

benefits and any other income w		r, claims & lawsuits, income tax refunds, mili	
Source	Amount	Per (week, month, year, etc.)	
	-		
	_		
	_		
	Tot	al Per Year	
	OR Tot	al Per Month	
ASSET INFORMATION			
BANK ACCOUNTS & SAV	INGS (List All Accou	nts Separately)	
Name of Bank, Savings & Loan	Amount On	In Whose Name	
or Credit Union	Deposit Now	Is The Account?	
	<u> </u>		
	<u> </u>		
Savings Bonds (List each sep	arately):		
Bond	Current Value _		
Bond	Current Value _		
Stocks, Bonds, Mutual Funds,	Mortgages, Land Contr	acts Held, Etc. (List each separately):	
		ceived in Previous Year	
<u></u>	Dividends & Interest Received in Previous Year		
Current Value	_Dividends & Interest Re	ceived in Previous Year	
Life Insurance Policies:			
Person(s) Insured	Current Ca	ash Value	

Current Cash Value

Make	Model	Year	Mil	leage	4Door / 2 Doo
Estimate Value _					
			Mil	eage	4Door / 2 Doo
Estimate Value _					
Make Estimate Value _			Mil	eage	4Door / 2 Doo
Other (Boats, Tr	ravel Trailers, A	TV's, Snow	mobiles, Antique	<u>s, Etc.)</u> :	
Туре		_ Year	Estimated	Value	
Туре		_ Year	Estimated	Value	
Туре		_ Year	Estimated	Value	
<u>HOUSEHOLD</u>	INFORMATION	<u>ON</u>			
List All Persons L	_iving at Your Ac	ldress (or col	lege students) and	d How They Con	tribute to Your
Income and/or Bi	<u>ills</u> :				
Name		Age	Relationship	-	ancial Contribution
Monthly Expe	ense Informat	ion			
Heating:	Electric:		Water:	Phone: _	
Cable:	Satellite:		Internet:	Insuran	ce:
Garbage:	Food:		Clothing:	Daycare	:
Other (Type)	Oth	or (Typo)	Other	· (Typo)	

OTHER INFORMATION

Is anyone not living with you (friend, relative, etc.) contributing to the household income or helping to pay your expenses? If yes, explain:
Do you plan or anticipate any changes in your living arrangements or financial situation in any way this year? If yes, explain:
Please add any other information that you feel is important to this application.
Application Required Documents Checklist:
Federal Income Tax Return (previous year) or Poverty Exemption Affidavit if filing is not required.
State Income Tax Return (previous year) or Poverty Exemption Affidavit if filing is not required
Property Tax Credit Return (previous year)
Proof of Income (most recent one month period – pay stubs, benefit statements, etc.)
Proof of Identity (drivers license, pictured identification, etc.)
Proof of ownership (deed, contract, etc.)

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

Notice: Per MCL 2117u(2b), a copy of all household members Federal Income Tax returns, State Income Tax returns (MI-1040) and Homestead Property Tax Credit claims (MI-1040CR 1, 2, 3 or 4) must be attached as proof of income or a signed Form 4988, Poverty Exemption Affidavit. Documentation for all income sources including, but not limited to, credits, claims, Social Security income, child support, alimony income, and all other income sources must be provided at time of application.

Petitioners: Do not sign this application until witnessed by the Assessor, Board of Review, or Notary Public.

I certify that the above information is true and correct to the best of my knowledge and that neither I, nor any household member residing within the principal residency, have money, income or property other than mentioned herein. If it is found that the information I supplied is fraudulent or misrepresented in any way, my application will be denied.

Date

Olginator o		<u> </u>		
Subscribed and sworn this	day of		20	
Must be signed by, and in front o	f, Assessor, <u>(</u>	or Board of Review I	Member, <u>or</u> Notary Publi	c:
Signature		Date		
Printed Name		Position		
My Notary Commission Expires				

IF YOU HAVE ANY QUESTIONS OR NEED HELP FILLING OUT THIS APPLICATION, PLEASE FEEL FREE TO CALL THE ASSESSING OFFICE MONDAY-FRIDAY 9:00 AM TO 5:00 PM AT 725-0530.

REVISED 8-17-2017 LC

Signature