



GAINES TOWNSHIP

9255 Grand Blanc Road
Gaines, Michigan 48436
Phone: (810) 635-3200 or (989) 271-6300
Fax: (989) 271-6038
Email: gaines@gainestownship.net



MICHAEL DOWLER, Clerk
11236 W. Reid Road
Swartz Creek, Michigan

PAUL J. FORTINO, Supervisor
5467 Nichols Road
Swartz Creek, Michigan

LEE PURDY, Trustee
11489 West Reid Road
Swartz Creek, Michigan

DIANE HYRMAN, Treasurer
6575 Seymour Road
Swartz Creek, Michigan

MATTHEW MOROS, Trustee
10558 Jewell Road
Gaines, Michigan

Hardship Exemption Application

I, _____, being the owner and resident of the property listed below, desire to apply for tax relief under Section 7u of the Michigan General Property Tax Act. (The real and personal property of persons, who, in the judgment of the Assessor and the Board of Review, by reason of poverty, are unable to contribute toward the public charges, are exempt from taxation under this Act.)

Property Description

Parcel Number: _____ Phone No. _____

Address: _____ Age of Applicant: _____

Marital Status: (Circle One) Married Single Separated Divorced Widow Widower

Did you apply for a Homestead Property Tax Credit? Yes No How much was it? _____

Real Estate

Is your home paid in full? Yes No If not what is the unpaid balance? _____

Name of Mortgage Company: _____

Monthly Payments: \$ _____ How long have you lived at this address? _____

Do you own, or are you buying, any other property? If so, list below:

Property Address	Title Holder of Property	Assessed Value	Amount & Date of last Taxes Paid

Income from property? Yes No If yes, how much? _____

Additional Information

List all income from: salaries, social security, rents, pension, unemployment compensation, disability, government pensions, dividends, workmen's compensation, union claims and lawsuits, alimony, child support of any other source.

Source of Income	Monthly Amount

Bank Accounts and Savings: List all bank accounts owned by your or your spouse. Also list all savings certificates, and cash in deposit box, on hand, or on deposit in credit unions.

Name of Institution	Name on Account	Amount on Deposit	Amount and Date

List all stocks, bonds, mortgages, or land contracts owned by you or your spouse.

Name of Institution	Name on Account	Amount on Deposit	Amount and Date

Life Insurance: List all policies held by you and your spouse.

Insured	Face Amt. of Policy	Monthly Payment	Paid Up Policies	Name of Beneficiary	Relationship of Beneficiary

Motor vehicles in household:

Make	Year	Monthly Payment	Balance

List below all persons living with you:

Name	Age	Relationship	Are they working?	How much money do they make?

Personal Debts: What do you owe?

To Whom	For what	Date of Debt	Original Amount	Monthly Payment	Balance

Other debts: List all other monthly obligations: utilities, food, heat, phone, etc.

To Whom	Amount	To Whom	Amount

Asset Listing: List all other assets, and their value, that are owned or controlled by you. For example: boats, ATV's, snowmobile/s, RV/camper, coin collections, antiques, silver, gold, etc.

Type of Asset	Value	Owner

Is there any further information you wish to add? _____

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

***** NOTICE: A copy of your 2016 Federal Income Tax Return, State Income Tax Return (MI-1040) and your Homestead Property Tax Credit claim (MI-1040 CR-1, 2, 3, or 4) must be attached as proof of income.**

The undersigned says that the statements made in the forgoing application are true and that he/she has no money, income, or property other than mentioned herein.

Signature: _____ Date: _____

FOR BOARD OF REVIEW USE ONLY

Disposition by Board of Review

Date: _____

☐ Denied

☐ Reduce to \$ _____

Board of Review

Supervisor/Assessor

Instruction for Applicant Requesting Consideration for Hardship Exemption

1. Applicants will not be eligible for consideration if they do not meet the Federal Poverty Guidelines and may apply only once annually.
2. Applicants must be the owners of the property and reside therein.
 - a. Must produce a driver's license or other acceptable method of identification on request.
 - b. Must produce a deed, land contract, or other evidence of ownership if requested.
3. Applications may be reviewed by the Board without the applicant being present. However, the Board may request that an applicant be physically present to respond to any questions the Board or Assessor may have. This means that you may be called in to appear on short notice.
4. You may have to answer questions regarding your financial affairs, your health, or the status of people living in your home before the Board at a meeting which is open to and will be attended by the public.
5. The Supervisor/Assessor must agree to the Board's decision in regards to the disposition of all individual poverty claims or the decision is null and void.
6. Applicants will be evaluated based on:
 - a. Data submitted to the Board by the petitioner.
 - b. Testimony taken from petitioner and information gathered from any source the Board may wish to use.
7. The Board will also consider all revenue and non-revenue producing assets owned by the petitioner in its deliberations as to whether relief should be granted.
8. Application must be signed and legible.
9. All applicants must submit 2017 copies of the following Or a Poverty Exemption Affidavit. (statement that you were **NOT** required to file Fed & State income tax returns)
 - a. Federal Income Tax Return – 1040 or 1040A
 - b. State Income Tax Return – MI-1040
 - c. Homestead Property Tax Claim – MI-1040CR
10. Applicants must fill out the application form in its entirety and submit to:

Gaines Township
9255 Grand Blanc Rd.
Gaines, MI 48436

If you need help or have any questions, please feel free to call 989-271-6300.

POVERTY GUIDELINES

ELIGIBILITY REQUIREMENTS OF GAINES TOWNSHIP, GENESEE COUNTY

To be eligible, a person shall do all the following on an annual basis:

- 1) Be an owner of and occupy as a homestead the property for which an exemption is requested.
- 2) File a claim with the supervisor or board of review, accompanied by federal and state income tax returns for all persons residing in the homestead, including any property tax credit returns filed in the immediately preceding year or in the current year.
- 3) Produce a valid drivers' license or other form of identification if requested.
- 4) Produce a deed, land contract, or other evidence of ownership of the property for which an exemption is requested if requested.
- 5) Meet the federal poverty income standards as defined and determined annually by the United States Office of Management and Budget.
- 6) The application for an exemption shall be filed after January 1, but before the day prior to the last day of board of review.
- 7) Comply with any additional eligibility requirements as determined by the Township board.

If **asset levels exceed** the items/amounts below, the individual/property owner **shall not be eligible for a Property Tax Poverty Exemption.**

- 1) The homestead being claimed and personal property used in connection with the use and occupancy of the homestead.
- 2) All other assets up to a cumulative dollar value of **\$ 25,000**

The following are the federal poverty income standards, which the United States Office of Management and Budget recommends that federal departments and agencies use. The standards are actually compiled and published by the Bureau of the Census, which refers to them as "poverty thresholds."

The governing body of the local assessing unit has the option of considering the age of the resident(s) when establishing their guidelines. This provision applies only when one or two persons reside in the homestead, because there are no age-related thresholds for three or more persons in the homestead.

FEDERAL POVERTY INCOME STANDARDS FOR 2018 ASSESSMENTS The following are the federal poverty income standards as of 12-31-17 for use in setting poverty exemption guidelines for 2018 assessments.

Size of Family Unit Poverty Guidelines:

- 1 - \$12,060
- 2 - \$16,240
- 3 - \$20,420
- 4 - \$24,600
- 5 - \$28,780
- 6 - \$32,960
- 7 - \$37,140
- 8 - \$41,320

For each additional person, add \$ 4,180