

STANNARD TOWNSHIP POVERTY EXEMPTION APPLICATION

Poverty application under MCL 211.7u

Name: _____
Date: _____
Address: _____ Phone: () _____

Full legal description of property:

Age _____ Married _____ Single _____ Widow _____ Widower _____ # of children _____

Please give name, address, age and status of each, if married or single. If no children, give next of kin (brothers, sisters, etc.) Use back of page for listing and other information why you believe your property should be exempt for tax for the year 20____.

Do you receive:

Old age assistance _____ Amount per month _____

Aid to dependent children _____ Amount per month _____

Welfare assistance _____ Amount per month _____

Social security _____ Amount per month _____

Retirement pension _____ Amount per month _____

Retirement income _____ Amount per month _____

Retirement insurance _____ Amount per month _____

Are you employed? _____ If yes, state nature of work, part- or full-time and amount received from this work each month. _____

Do you own this property free and clear? _____

Mortgage? _____ Balance owing _____ Contract? _____ Balance owing _____

Do you occupy this property as your home? _____ Are others living in your home? _____

Who? _____

Do your boarders rent rooms or apartments? _____

If so, give annual income _____

Do you own or have an interest in other property? _____ If so, give location and value of each:

Location _____

Value _____ Taxes now owing _____

Do you (husband or wife or both) own any stocks, bonds, savings bonds, government bonds, securities or other investments? _____ If so, where and how much?

_____ Cash on hand _____

Do you own an automobile or truck? _____ How many? _____ Make _____ Year

_____ Does anyone contribute to your support? _____

If so, who? _____ How much? _____

Applicant's signature _____

Subscribed and sworn to me before this _____ day of _____, 20____.

_____ Assessor or Notary Public, _____ County, Michigan.

My commission expires: _____

FOR SUPERVISORS USE ONLY

Assessed valuation _____ Full or partial exemption

Recommended by Supervisor
