



# Required State Application form enclosed

## INSTRUCTIONS FOR POVERTY TAX EXEMPTION APPLICATION

All parties wishing to appeal the assessed and taxable valuations of their property on the basis of **financial need** must complete and return the Poverty Exemption Application to this office along with all requested documents before 4:30 p.m. by one of the following dates to have your application reviewed by the July or December Board of Review. If possible, please submit early in July or before for processing.

**Deadline dates are the Friday before the Board of Review:**

**July 15, 2022**

**December 9, 2022**

The Poverty Tax Exemption is a one year exemption. A new application must be re-submitted each year. This appeal is for real property taxes **only**. **Special Assessments are NOT considered taxes and should be listed on the expense portion of the application.**

**Your applications must be completely filled out and signed before submission. Failure to supply copies of Federal and State tax returns filed, bank statements, etc. will be grounds for denial of the exemption.** If applicant and/or other members of the household are not required to file Federal and State income tax forms based on low income, form 4988 Poverty Exemption Affidavit must be completed and submitted with the application. If you need assistance in making copies, the staff will be glad to help you.

Please refer to the Charter Township of Springfield **2022** Poverty Tax Exemption Guidelines and Standards to determine eligibility.

### Eligibility Requirements:

- 1) Combined income of all individuals living in the home should not exceed the **2022** Poverty Tax Exemption Guidelines and Standards as established by the Springfield Township Board.
- 2) You must own and occupy the property as a principal residence for a minimum of 3 years, as of **December 31, 2021**.
- 3) Applicant should not have ownership in any other real estate other than what is used as the principal residence.
- 4) Applicant's total net assets (excluding principal residence) should not exceed \$125,000.

Eligibility Requirements cont..

- 5) Poverty Tax Exemptions are limited to a period of three years out of the last seven years unless the applicant is age 62 or older, or a physical or mental disability prevents gainful employment. Proof of disability by a physician may be required.
- 6) You **MUST** submit a completed Poverty Tax Exemption Application, including all tax returns, income and asset verification and other information requested. Failure to submit a completed application or omission of information requested will be grounds for denial.

If your property is in risk of foreclosure, listed for sale, or is in the process of being sold, please notify the Board of Review prior to the July or December meeting date.

The Supervisor, Assessor, and/or Board of Review may conduct an investigation to verify information submitted, statements made, and qualifications of the applicant.

If you have any questions, please call the Assessing Department at (248) 846-6532.

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**All submitted forms will be retained by the Board of Review and become part of the Board of Review records. Under the Freedom of Information Act, all documents and information (except tax forms) submitted to the Board of Review are public record, potentially subject to public disclosure.**

# ATTACHMENT A

## 2022 POVERTY TAX EXEMPTION GUIDELINES AND STANDARDS

The 2021 Very Low Income Limits established by the U.S. Department of Housing and Urban Development were used to establish these guidelines. For any applicant whose income is at least 21% below the following income levels, a total exemption from ad-valorem property taxes **MAY** be granted:

Family of 1 . . . .	\$28,000 yearly	Family of 5 . . . .	\$43,200 yearly
Family of 2 . . . .	\$32,000 yearly	Family of 6 . . . .	\$46,400 yearly
Family of 3 . . . .	\$36,000 yearly	Family of 7 . . . .	\$49,600 yearly
Family of 4 . . . .	\$40,000 yearly	Family of 8 . . . .	\$52,800 yearly
		Each addnl. . . . .	\$ 3,200 yearly

Guidelines adopted October 14, 2022 at the Springfield Township Board meeting.

## 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.

<b>PART 1: PERSONAL INFORMATION</b> — Petitioner must list all required personal information.				
Petitioner's Name			Daytime Phone Number	
Age of Petitioner	Marital Status	Age of Spouse	Number of Legal Dependents	
Property Address of Principal Residence		City	State	ZIP Code
<input type="checkbox"/> Check if applied for Homestead Property Tax Credit		Amount of Homestead Property Tax Credit		
<b>PART 2: REAL ESTATE INFORMATION</b>				
List the real estate information related to your principal residence. Be prepared to provide a deed, land contract or other evidence of ownership of the property at the Board of Review meeting.				
Property Parcel Code Number		Name of Mortgage Company		
Unpaid Balance Owed on Principal Residence	Monthly Payment	Length of Time at this Residence		
Property Description				
<b>PART 3: ADDITIONAL PROPERTY INFORMATION</b>				
List information related to any other property owned by you or any member residing in the household.				
<input type="checkbox"/> Check if you own, or are buying, other property. If checked, complete the information below.			Amount of Income Earned from other Property	
1	Property Address	City	State	ZIP Code
	Name of Owner(s)	Assessed Value	Date of Last Taxes Paid	Amount of Taxes Paid
2	Property Address	City	State	ZIP Code
	Name of Owner(s)	Assessed Value	Date of Last Taxes Paid	Amount of Taxes Paid

**PART 4: EMPLOYMENT INFORMATION** — List your current employment information.

Name of Employer			
Address of Employer	City	State	ZIP Code
Contact Person	Employer Telephone Number		

**PART 5: INCOME SOURCES**

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	Monthly or Annual Income (indicate which)

**PART 6: CHECKING, SAVINGS AND INVESTMENT INFORMATION**

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 Institution or Investments	Amount on Deposit	Current Interest Rate	Name on Account	Value of Investment

**PART 7: LIFE INSURANCE** — List all policies held by all household members.

Name of Insured	Amount of Policy	Monthly Payments	Policy Paid in Full	Name of Beneficiary	Relationship to Insured

**PART 8: MOTOR VEHICLE INFORMATION**

All motor vehicles (including motorcycles, motor homes, camper trailers, etc.) held or owned by any person residing within the household must be listed.

Make	Year	Monthly Payment	Balance Owed

<b>PART 9: HOUSEHOLD OCCUPANTS</b> — List all persons living in the household.				
First and Last Name	Age	Relationship to Applicant	Place of Employment	\$ Contribution to Family Income

<b>PART 10: PERSONAL DEBT</b> — List all personal debt for all household members.					
Creditor	Purpose of Debt	Date of Debt	Original Balance	Monthly Payment	Balance Owed

<b>PART 11: MONTHLY EXPENSE INFORMATION</b>			
The amount of monthly expenses related to the principal residence for each category must be listed. Indicate N/A as necessary.			
Heating	Electric	Water	Phone
Cable	Food	Clothing	Health Insurance
Garbage	Daycare	Car Expense (gas, repair, etc.)	
Other (type and amount)	Other (type and amount)	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 ACKNOWLEDGMENT**

The governing body of the local assessing unit shall determine and make available to the public the policy and guidelines used for the granting of exemptions under MCL 211.7u. In order to be eligible for the exemption, the applicant must meet the federal poverty guidelines published in the prior calendar year in the Federal Register by the United States Department of Health and Human Services under its authority to revise the poverty line under 42 USC 9902, or alternative guidelines adopted by the governing body of the local assessing unit so long as the alternative guidelines do not provide income eligibility requirements less than the federal guidelines. The policy and guidelines must include, but are not limited to, the specific income and asset levels of the claimant and total household income and assets. The combined assets of all persons must not exceed the limits set forth in the guidelines adopted by the local assessing unit.

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**

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
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**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](mailto:taxtrib@michigan.gov)