CITY OF GLADSTONE POVERTY EXEMPTION APPLICATION

206 of 1893. The principal re	oly for property tax relief under esidence of persons who, in the f poverty are unable to contri	er MCL 21 le judgmei	1.7u of the Gene nt of the township	ral Prope superv	isor or city assessor and
regarding all members resid	omplete, this application mus ling within the household, ar legibly and attach additional	nd 3) inclu	ide all required		
PERSONAL INFORMATIO	N: Petitioner must list all req	uired perso	onal information.		
Property Address of Principal Res			Phone Number:		
Age of Petitioner:		Marital St	atus:	Age	of Spouse:
Number of Legal Dependents:		Age of De	ependents:		
Applied for Homestead Property	Tax Credit (yes or no):	Amount o	f Homestead Proper	rty Tax C	redit:
	TION: List the real estate inform other evidence of ownership of	of the prop		eeting.	dence. Be prepared to
Unpaid Balance Owed on Princip	al Residence:	Monthly Payment: Length of Time at This Residence			Time at This Residence:
Property Description:					
ADDITIONAL PROPERTY member owns.	INFORMATION: List inform	nation rela	ted to any other pr	operty yo	ou, or any household
Do you own, or are buying, other information below.	property (yes or no)? If yes, comp	lete the	Amount of Income	e Earned 1	from Other Property:
Property Address	Name of Owner(s)		Assessed Value	e Ar	mount & Date of Last Taxes Paid
			\$		
			\$		

EMPLOYMENT INFORM	ATION: List your	currer	nt employ	ment i	nformat	ion.		
Name of Employer:				Name of Contact Person:				
Address of Employer:						Employer Phor	ne Number:	
List all income sources, inclu	ding but not limited	l to: sa	alaries, S	ocial S	ecurity,	rents, pensions	, IRA's (inc	dividual retirement
accounts), unemployment co								
judgments from lawsuits, ali	mony, child suppor	t, frie	end or far	mily co	ontributi	on, reverse mo	rtgage, or a	ny other source of
income.								
So	ource of Income					Monthly or Ann	ıal Income (i	ndicate which)
						<u>,</u>		,
CHECKING, SAVINGS A	ND INVESTMEN	T IN	JFORM A	ATION	J. List:	any and all say	ings owned	l by all household
members, including but not li								
of deposit, cash, stocks, bond				<i>6</i>	, ,	<i>g.</i> , .		
Name of Financial Institution			Curre			Value of		
or Investments	Amount on Dep	osit	Interest	Rate		Name on Account		Investment
LIFE INSURANCE: List al	Il policies held by al	l hous	sehold m	embers	2			
EIFE INSURANCE: Elst di	Amount of Policy		Sonthly		cy Paid			Relationship to
Name of Insured	,	Payment		in Full		Name of Beneficiary		Insured
MOTOR VEHICLE INFO			,		_	orcycles, motor	homes, cam	per trailers, etc.)
held or owned by any person	residing within the	nouse	enola mus	st be iis	stea.			
Make Year			Monthly Payment		Ba	Balance Owed		
		· <u> </u>						

LIST ALL PERSONS LIVING IN HOUSEHOLD: All persons residing in the residence must be listed.

First & Last Name	Age	Relationship to Applicant	Place of Employment	Amount of Monetary Contribution to Family Income

PERSONAL DEBT: All personal debt for all household members must be listed.

	ii personar acot for an no				
Creditor	Purpose of Debt	Date of Debt	Original Balance	Monthly Payment	Balance Owed
					l

MONTHLY EXPENSE INFORMATION: 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:	Heath Insurance:	Garbage:
Daycare:	Car Expense (gas, repair, etc):	Other (list type):
Other (list type):	Other (list type):	Other (list type):
Other (list type):	Other (list type):	Other (list type):
Other (list type):	Other (list type):	Other (list type):

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: Per MCL 211.7u(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. 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 Supervisor, Assessor, Board of Review or Notary Public. (Must be signed by either the Supervisor, Assessor, Board of Review Member or Notary Public)

STATE OF MICHIGAN COUNTY OF DELTA

I, the undersigned Petitioner, hereby declare that the foregoing information is complete and true and that neither I, nor any household member residing within the principal residency, have money, income or property other than mentioned herein.

	Petitioner Signature		Date
Subscribed and sworn this	day of	, 2018	
Assessor Signature:		Printed Name:	
BOR Member Signature:		Printed Name:	
Notary Signature:		Printed Name:	
My Commission Expires:			
This application shall be filed aft of Review to the address below.	er January 1, but before the day	prior to the last day of Marc	ch, July or December Board
	Board of Review	V	
	c/o Assessor		
	City of Gladstone		
	1100 Delta Ave	nue	
	Gladstone MI 40	837	

DECISIONS OF THE MARCH BOARD OF REVIEW MAY BE APPEALED IN WRITING TO THE MICHIGAN TAX TRIBUNAL BY JULY 31 OF THE CURRENT YEAR. JULY OR DECEMBER BOARD OF REVIEW DENIALS MAY BE APPEALED TO MICHIGAN TAX TRIBUNAL WITHIN 30 DAYS OF THE DENIAL. A COPY OF THE BOARD OF REVIEW DECISION MUST BE INCLUDED WITH THE FILING.

Michigan Tax Tribunal PO Box 30232 Lansing, MI 48909 Phone: 517-373-3003

Fax: 517-373-1633

E-mail: taxtrib@michigan.gov

Persons in Household 48 Contiguous States and D.C. Poverty Guidelines (Annual)

	100%	133%	138%	150%	200%	250%	300%	400%
1	\$12,140	\$16,146	\$16,753	\$18,210	\$24,280	\$30,350	\$36,420	\$48,560
2	\$16,460	\$21,892	\$22,715	\$24,690	\$32,920	\$41,150	\$49,380	\$65,840
3	\$20,780	\$27,637	\$28,676	\$31,170	\$41,560	\$51,950	\$62,340	\$83,120
4	\$25,100	\$33,383	\$34,638	\$37,650	\$50,200	\$62,750	\$75,300	\$100,400
5	\$29,420	\$39,129	\$40,600	\$44,130	\$58,840	\$73,550	\$88,260	\$117,680
6	\$33,740	\$44,874	\$46,561	\$50,610	\$67,480	\$84,350	\$101,220	\$134,960
7	\$38,060	\$50,620	\$52,523	\$57,090	\$76,120	\$95,150	\$114,180	\$152,240
8	\$42,380	\$56,365	\$58,484	\$63,570	\$84,760	\$105,950	\$127,140	\$169,520

Add \$4,320 for each person over 8