STATE OF MICHIGAN COUNTY OF WASHTENAW AUGUSTA CHARTER TOWNSHIP RESOLUTION ADOPTING POVERTY/HARDSHIP **GUIDELINES FOR CALANDER YEAR 2022 BOARD OF REVIEW**

RESOLUTION 22-01

At a regular meeting of the Augusta Charter Township Board of Trustees, Washtenaw County, Michigan, held in the Board Chambers at 8021 Talladay Road, Whittaker, Michigan 48190, on the 25th day of January 2022 at 7:00 p.m.

WHEREAS, pursuant to Public Act 390, 1994 Michigan Compiled Laws Sec. 211.7u: The real and personal property of persons, in the judgement of the Supervisor and Board of Review by reason of poverty/hardship, are unable to contribute to the public charges is eligible for exemption in whole or part from taxation and

WHEREAS, the Board of Trustees adopts the following guidelines for the Supervisor and Board of Review to implement.

NOW, THEREFORE BE IT RESOLVED, that the Board of Review shall follow Public Act 390, 1994 Michigan Compiled Laws Sec. 211, 7u: using the attached guidelines for granting or denying an exemption.

Motion to approve Resolution 22-01 was offered by Gonczy and seconded by Shelby. Roll Call: Aye; Adams, Burek, Fuqua-Frey, Gonczy, Ortiz, Hall, Shelby. Nay; None Absent: None Motion Passed.

RESOLUTION DECLEARED ADOPTED.

Brian Shelby, Augusta Charter Township, Supervisor

CERTIFICATE

I, Kimberly Gonczy, the elected and acting Clerk of Augusta Charter Township, hereby certify that the foregoing resolution was adopted by the Township Board, as presented at a meeting on January 25, 2022, at which meeting a quorum was present, by a roll call vote of said members as herein set forth; that said resolution was ordered to take immediate effect.

Kimberly Gonczy, Augusta Charter Township, Clerk

22-01 Resolution

Final

Page 1 of 3

AUGUSTA CHARTER TOWNSHIP BOARD OF REVIEW GUIDELINES FOR HARDSHIP EXEMPTIONS FOR 2022

A Hardship Exemption is defined by the Michigan Compiled Laws Sec. 211.7u: The real and personal property of persons, in the judgment of the supervisor and board of review by reasons of hardship, are unable to contribute toward the public charges is eligible for exemption in whole or in part from taxation under this act.

- 1. In granting a hardship exemption, the Board of Review realizes this represents a shift of that portion of the tax burden to the other taxpayers of the community.
- 2. A hardship exemption is granted for one year only. The applicant may apply each year to be considered for an exemption.
- 3. The exemption shall apply only to the applicant's homestead and not excess land.
- 4. Any relief granted is a reduction over and above the \$1,200 maximum Homestead Property Tax Credit granted by the State of Michigan through income tax filing.
- 5. A copy of the applicant's (and spouses', if filed separately) most recent FEDERAL INCOME TAX RETURN (if you are required to file federal income tax) and MICHIGAN HOMESTEAD PROPERTY TAX CREDIT CLAIM must be submitted along with a completed Hardship Application Form.
- 6. Applicants are not eligible for consideration if they do not meet the following income guidelines as approved by the Augusta Charter Township Board of Trustees:

MAXIMUM INCOME

\$22,000 - 1 member households

\$29,200 - 2 member households

\$37,000 - 3 member households

\$44,300 - 4 member households

\$51,800 - 5 member households

\$59,600 – 6 member households

\$67,000 - 7 member households

\$74,800 - 8 member households

\$7,800 Each additional member of household

Members of household must qualify as a dependent from whom the applicant is entitled to a dependency exemption by IRS rules.

- 7. Applicants may be ineligible if their level of assets exceeds \$50,000 per household member.
- 8. Meeting the guidelines does not automatically qualify an applicant for an exemption. The Board of Review will take into account the expenses and extenuating financial circumstances which are temporarily beyond the control of the applicant.

INSTRUCTIONS FOR HARDSHIP REDUCTION AUGUSTA CHARTER TOWNSHIP

The following information must be provided to be eligible for a hardship reduction:

- 1. <u>COMPLETE ALL SECTIONS</u> OF THIS APPLICATION IN FULL; BE SURE TO SIGN THE APPLICATION.
- 2. Submit a <u>completed and signed copy</u> of the following:
 - 2021 Michigan Homestead Property Tax Credit Claim (MI 1040 CR)
 - 2021 Federal Income Tax Return (1040), if you are required to file federal income tax.
 - 2021 Federal Income Tax Return (1040) for all other occupants of your home.
- 3. If an occupant of your home is not employed but has income from another source, you must show the income in "Annual Income" on page 1 of your application. It must also be on page 3 under the "2021 Household Income" section.
- 4. If you completed the section on page one of the application indicating you have major or unusual out-of-pocket expenses, you must provide copies of documents verifying these expenses. This does not include documentation of everyday living expenses.
- 5. The application must be legible. If you need or want to provide additional information, please attach a separate sheet.
- 6. Please do not submit originals of supporting documentation; we cannot return them.
- 7. If the application is incomplete or you do not include copies of the required financial documents, i.e.: Federal Income Tax Forms; you will be ineligible for a hardship reduction.

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.

PAR	T 1: PERSONAL INFOR	MATION -	- Petitioner must I	ist all required persona	al information.				
Petitioner's Name					Daytime Phone Number				
Ass of	Petitioner	Marital Status		Age of Spouse	I Novemb				
Age of	Petitioner	Marital Status		Age of Spouse	Numb	Dependents			
Proper	ty Address of Principal Residence			City	State ZIP Co				
	Check if applied for Hor	mestead P	roperty Tax Credit	Amount of Homestead Property Tax Credit					
PAR	T 2: REAL ESTATE INF	ORMATIO	N						
	the real estate information				o provide a de	eed, land	contract or other		
Concordant in the control of the con	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 Resid	ence	Monthly Payment		this Reside	Residence			
Droper	ty Description		dayan an a						
PAR	T 3: ADDITIONAL PRO	PERTY IN	FORMATION						
List	List information related to any other property owned by you or any member residing in the household.								
Check if you own, or are buying, other property. If che information below.			ecked, complete the	Earned from other Property					
	Property Address			City		State	ZIP Code		
1	Name of Owner(s)			Assessed Value	Date of Last Taxe	s Paid	Amount of Taxes Paid		
	Property Address			City	Kuningan	State	ZIP Code		
2	Name of Owner(s)			Assessed Value	Date of Last Taxe	s Paid	Amount of Taxes Paid		

PART 4: EMPLOYMENT	INFORMATION	I — List your cui	rrent employi	ment infor	mation.	H W		
Name of Employer		•						
Address of Employer			City			State	ZIP Code	
, was on Employor			Oity			State	ZIP Code	
Contact Person			Employer Tele	phone Numbe	er			
PART 5: INCOME SOUR	CES				1100 million			
		lianita di ta	- 0 10			ID 4 ('	F 1 7 F 1	
List all income sources, i accounts), unemploymen judgments from lawsuits income, for all persons re	nt compensation, , alimony, child s	disability, gover support, friend o	nment pensi	ons, work	er's compensa	tion, divi	dends, claims and	
, , , , , , , , , , , , , , , , , , , ,	John Market Pro-				Month	lv or An	nual Income	
	Source of	Income			Monthly or Annual Income (indicate which)			
			2	A ME HAIR		THE STATE OF		
DADTA OUEQUING OA	17/11/00 AND 18/1							
PART 6: CHECKING, SA	WINGS AND IN	VESTMENTINE	ORMATION					
List any and all savings accounts, postal savings persons residing at the p	, credit union sh							
Name of Financial In	COLUMN CONTRACTOR DESCRIPTION OF THE PROPERTY	Amount				Value of		
or Investment	S (on Deposit I	nterest Rate	t Rate Name on Account		nt	Investment	
				1				
The state of the s								
PART 7: LIFE INSURAN	CE — List all po	licies held by all	l household r	nembers.			done see a se	
	Amount of	Monthly	Policy Pa				Relationship to	
Name of Insured	Policy	Payments			Name of Bene		Insured	
PART 8: MOTOR VEHIC	LE INFORMATI	ON						
All motor vehicles (inclu within the household mu		s, motor homes	, camper tra	ilers, etc.) held or own	ed by ar	ny person residing	
			10 (0					
Make	Year		Monthly Payment		Balance Owed			
		7712						

PART 9: HOUSEHOLD	OCCUPANTS -	– List all pe	rsons liv	ing i	n the househ	old.			
First and Las	First and Last Name		Age		Relationship to Applicant Pla		ace of Employment		\$ Contribution to Family Income
					-				
					-11	-			
PART 10: PERSONAL I	DFBT — List all	personal d	ebt for a	II hou	usehold mem	bers.			
TART TOTT ERGOTALE		porounara	Date					M	
Creditor	Purpose	of Debt	of De		Original Ba	Balance Monthly Payme		nly Payment	Balance Owed
	_								
				-					
						,	_		
					an-s-				
PART 11: MONTHLY E	XPENSE INFOR	RMATION			4				
The amount of monthly	expenses rela	ted to the p	principal	resid	dence for eac	ch ca	tegory i	must be liste	d. Indicate N/A as
necessary.				40				,	
Heating	Electric	Water			ſ			Phone	
Cable	Food		Clothi		ng			Health Insurance	
Garbage		Daycare	aycare				Car Expense (gas, repair, etc.)		
Other (type and amount) Other			ther (type and amount)				Other (type and amount)		
Other (type and amount) Oth			her (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					

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