

OSHTEMO CHARTER TOWNSHIP
POVERTY TAX EXEMPTION APPLICATION

This form should be completed if you, for reasons of poverty, are unable to pay the property taxes assessed by Oshtemo Township on your homestead residence. In applying for an exemption, you will be required to provide annually:

1. Specific income and asset information (for yourself and all individuals residing in your home);
2. Proof of your ownership (deed, land contract, or other evidence of ownership) and occupancy of the residence for which you are seeking an exemption;
3. State and Federal income tax returns and/or property tax credit returns (for yourself and all individuals residing in your home);
4. The Michigan Homestead Property Tax Credit Claim Form (MI-1040CR) for the immediately preceding or current year;
5. A valid driver's license or other legally valid form of picture identification;
6. Proof that you meet the federal poverty income standards (as annually determined by the United States Office of Management and Budget);
7. A completed application, delivered in person, to the Assessor's Office after January 1 but at least a week before the start of the March Board of Review, July Board of Review or December Board of Review of the year for which you are applying;

Additionally, you may be required to appear before the Board of Review at a public meeting to answer questions regarding your application. You may also be subject to an investigation to verify the information submitted in your application, and establish that your non-exempt assets do not exceed \$25,000.

These policies are set by the Oshtemo Charter Township Board in compliance with Michigan State Law. The Township will use criteria established in its Property Exemption Guidelines to review your application. If you have any questions, please contact the Township Assessor, or Township Attorney (www.oshtemo.org/contact/ or (269) 375-4260).

Instructions for filing a claim with the Township Supervisor:

1. Complete the following application in full, but do not sign the form.
2. Do not leave any sections blank, if you have questions regarding this form, please contact the Township Assessor's Office for guidance.
3. If you require additional space to respond to any of the questions on this form, please attach a typed response, which clearly indicates which question(s) you are providing additional information regarding.
4. Completed applications must be delivered in person to the Township Assessor a week before the start of the March Board of Review, July Board of Review or December Board of Review of the year for which you are applying.
5. Bring copies of all requested documents:
 - a. Previous year State and Federal Tax Returns;
 - b. Michigan Homestead Property Tax Credit Claim Form;
 - c. Proof of ownership/residency/homestead for the residence for which you are requesting a tax exemption;
6. Bring the completed, unsigned, form in person to:

Oshtemo Township Hall
7275 West Main Street,
Kalamazoo, MI 49009
(296) 375-4260
7. Bring your driver's license, or other legally valid picture identification with you.
8. Sign the form when directed by the Township Assessor, and provide your ID for photocopying if requested.

POVERTY TAX EXEMPTION APPLICATION FORM

Street Address: _____

Parcel Number: 3905-_____ - _____ - _____

SECTION 1: APPLICANT INFORMATION

Name of Applicant: _____

Marital Status (circle one): **Married** **Single** **Divorced** **Other** _____

Social Security Number: _____ - _____ - _____

Driver's License/State ID Number: _____ **Issuing State:** _____

Phone Number: _____ **Email address:** _____

Are you the sole owner of this property? **Yes / No.** If no, please provide:

Name of Co-Applicant: _____

Social Security Number: _____ - _____ - _____

Driver's License/State ID Number: _____ **Issuing State:** _____

Phone Number: _____ **Email address:** _____

SECTION 2: HOUSEHOLD, INCOME, AND ASSET INFORMATION

1. Please provide the following information for all people (including yourself) who live at the above address.

Name	Relationship	Age	Monthly Income

2. Do you currently have a mortgage on this property? **Yes / No.** If yes, please provide:

Current unpaid balance of your mortgage: \$_____

Monthly payment amount: \$_____

Name of your mortgage company: _____

3. Do you rent or lease any portion of this property? **Yes / No.**

If yes, what portion? _____% Monthly rent collected: \$_____

4. Please list all household income, and specify which member of your household supplies the income from each applicable source:

Type of Income	Amount (monthly)	Source (self, co-applicant, etc.)
Salary/wages	\$	
Social Security	\$	
Pension(s)	\$	
Unemployment	\$	
Disability	\$	
Dividends/ Interest Income	\$	
Workmen's Compensation	\$	
Alimony	\$	
Child Support	\$	
Rental	\$	
Other:	\$	

Total Monthly \$ _____

APPLICATIONS WILL NOT BE ACCEPTED WITHOUT COPIES OF YOUR LATEST FEDERAL AND STATE INCOME TAX RETURNS (OR A POVERTY EXEMPTION AFFIDAVIT) AND MICHIGAN HOMESTEAD PROPERTY TAX CLAIM FORM (REGARDLESS OF YOUR INCOME) ATTACHED.

5. Please list the following **Bank Account** information for all residents at this address:

Name(s) on Account	Name of Bank/Credit Union	Current Balance
		\$
		\$
		\$
		\$

9. Do you have any other assets (excluding your homestead and normal household goods) which have not otherwise been disclosed in this form? **Yes / No.**

If yes, please list the assets and their approximate value:

SECTION 3: CERTIFICATION

Please be aware, any willfully false statements or misrepresentations in this form may constitute perjury, an offense punishable under Michigan law. By signing this form, I acknowledge that the information on this application, and the documents provided by me in support of this application, are, to the best of my knowledge true and correct statements of fact regarding my property, income, and assets.

I, _____ being the owner and resident of the Oshtemo Township property listed on this form, request tax relief under M.C.L. § 211.7(u) of the Michigan General Property Tax Act (Public Act 390 of 1994), the “Real and personal property of persons who, in the judgement of the Supervisor and Board of Review, by reason of poverty, are unable to contribute toward the public charges, are exempt from taxation under this act.”

DO NOT SIGN THIS FORM UNTIL YOU ARE INSTRUCTED TO DO SO.

Applicant’s Signature

Date: _____

Co-Applicant’s Signature

Date: _____

Applicant(s) presented picture ID, and signed this form in my presence:

Received by: _____

Date: _____

FOR TOWNSHIP USE ONLY

Total Income: \$ _____ **Eligible? Yes No**

Total Assets: \$ _____ **Eligible? Yes No**

Eligible Amount:

Taxes (\$_____.____) – Eligible MI Homestead Credit (\$_____.____ = Exemption (\$_____.____)

Submitted to Board of Review: _____

Applicant Scheduled to Appear at _____ Board of Review.

Application: ____ **Approved** ____ **Denied**