

Hardship Exemption Application

I/We, _____, being the owner(s) and resident(s) of the property listed below, apply for tax relief under MCL 211.7u of the General property Tax Act, (the real and personal property of persons who, in the judgment 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).

Property Code Number _____

Property Description: _____

Property Address: _____ Phone () _____

Marital Status: _____

Age of Applicant: _____ Age of Spouse: _____

Number of Dependents: _____ Age of Dependents: _____

Have you applied for Homestead Property Tax Credit this Year? _____

How much was your Property Tax Credit? _____

ATTACH A COPY OF 1040 CR AND FEDERAL OR STATE INCOME TAX RETURN, IF FILED FOR THE CURRENT YEAR.

REAL ESTATE: Is home paid for? _____ Unpaid balance: _____

Name of Mortgage Co. _____ Monthly Payment: _____

How long have you lived at this residence? _____

Do you own, or are you buying any other property? _____

If so, list below:

Property Address	Name of Owner	Assessed Value	Amount and Date of Last Taxed Paid

Income earned from above property \$ _____

Name of Employer: _____

Address: _____

Phone No. () _____

Name of Spouse's Employer: _____

Address: _____

Phone No. () _____

List all income from salaries, Social Security, rents, pensions, unemployment compensation, disability, government pensions, workers' compensation, dividends, claims and judgments from lawsuits, alimony, child support and any other source.

Source of Income	Monthly or Annual Income

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SAVINGS AND INVESTMENTS: List all savings owned by you or your spouse, including savings accounts, postal savings, credit union shares, certificates of deposit, cash, stocks, bonds or similar investments.

Name of Financial Institution or Investments	Amount on Deposit	Name on Account	Value of Investment

LIFE INSURANCE: List all policies held by you and your spouse.

Insured	Amount of Policy	Amt. Paid Monthly	Paid Up Policy	Name of Beneficiary	Relationship to Insured

MOTOR VEHICLES IN HOUSEHOLD:

Make	Year	Monthly Payment	Balance Owed

